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ABSTRACT

A curriculum guide for an Acquired Immune Deficiency Syndrome (AIDS) prevention education program for grades 4-8 is presented in this document. The purpose of these materials is to serve as a resource to encourage and facilitate AIDS education in order to prevent the disease. It is recommended that this AIDS program be taught as part of the human growth and development curriculum and that AIDS be addressed as a health issue. Guidelines for direct and sensitive teaching in human sexuality which is necessary for AIDS education are provided. Civil rights issues surrounding AIDS and the economic impact of AIDS are described. These four objectives of the AIDS education program are presented with relevant teacher materials, work sheets, fact sheets, and activity descriptions: (1) individual responsibility for prevention; (2) basic information about communicable disease; (3) basic information about AIDS; and (4) reducing or eliminating risk of AIDS. Appendices include the education code relating to human sexuality education, AIDS surveillance reports, references and resources, audio-visual resources, and print materials. (ABL)

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AIDS

Prevention Education Project

Grades 4-8

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This curriculum package is an initial effort. As you use the materials in the classroom, you may see opportunities for improvement. Please forward your suggestions to Barbara K. Bissell, Health Coordinator, San Mateo County Office of Education, 333 Main Street, Redwood City, CA 94063.

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ACKNOWLEDGEMENTS

The AIDS Prevention Curriculum Project was developed by a team of San Mateo County educators, in a cooperative effort involving the San Mateo County Office of Education and twelve elementary and unified school districts in San Mateo County.

In May 1987, the Council for Instructional Improvement recognized a need for AIDS Prevention instruction at the elementary level, grades 4 through 8. The Instructional Services Division of the San Mateo County Office of Education agreed to coordinate the project. The intent was to complete the project in August 1987 in order to implement the program in interested San Mateo County elementary schools in the 1987-1988 school year.

It is a reflection of the outstanding cooperation and diligence of the team members that this task was accomplished.

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PURPOSE STATEMENT

These materials have been developed as a resource to encourage and facilitate AIDS education. Teaching about AIDS is an essential part of a successful battle against the spread of the disease. This disease can be prevented.

A concerted effort has been made to provide accurate information in these materials. The information is consistent with the current knowledge about AIDS. There appears to be no reason to expect substantive changes in the basics of the material in the near future. However, changes will occur as a result of research and the improvement in medical management of the disease, for which this project cannot be responsible.

RATIONALE

AIDS is THE immediate major health problem.
AIDS is going to continue to be the major health problem.
AIDS affects all people.
AIDS will affect all facets of community life.
AIDS is presently an incurable disease.
Every individual needs to know how to protect him/herself.
Instruction will assist in overcoming the fears and dispelling the myths that lack of knowledge creates.
Students want and need to be informed correctly about AIDS in order to make wise decisions.
There is evidence of increased sexual activity and unplanned pregnancies at the elementary level.
Substance Abuse is occurring at the elementary level.
Students and staff need to be prepared for students, school staff, family members and friends who test positive for the AIDS virus.
The Education Code mandates instruction in Sexually Transmitted Diseases.

RECOMMENDATIONS FOR IMPLEMENTATION OF AIDS INSTRUCTION

A board policy will be established recommending that AIDS instruction be given at the elementary level, and that informed consent will not be necessary for informal discussions concerning the non-sexual aspects of the AIDS epidemic.

A unit on AIDS will be taught as part of the human growth and development curriculum.

Education of all staff will be implemented through...

- staff meetings
- awareness inservice
- training of staff who will implement the curriculum.

Community support will be established and maintained through education and cooperative efforts with parent groups and staff.

METHODS

1. Follow the guidelines of your school or district concerning parental consent for classes involving discussions of sexuality and drug use.

2. Present the basics about communicable diseases before teaching about AIDS.

3. Present units on human growth and development and family life before teaching about AIDS, if possible.

4. Present materials in a factual and specific manner appropriate to grade level.

TEACHING ABOUT HUMAN SEXUALITY

To be effective in teaching about AIDS, direct and sensitive talk about human sexuality is necessary. For teachers who do not normally focus in this area there may be concerns. The following guidelines are intended to assist anyone teaching at any grade level, in any subject area around issues of sexuality.

- Personal and family values about sexuality differ. Differences should be acknowledged and accepted. There needs to be clarification of the differences between fact and opinion for teachers and students.

- Personal and family boundaries differ and need to be respected. Neither students nor teachers should be expected to disclose opinions unless they wish to do so, nor should they share personal or family experiences.

- Rules concerning confidentiality of classroom discussions for teachers and students need to be established and adhered to, except where information concerning behaviors that are against the law or dangerous are disclosed, such as child or sexual abuse.

- Rules concerning appropriate questions need to be established. We suggest an anonymous question box to deal sensitively with natural embarrassment around sexuality. The teacher should not expect to be able to answer all questions as they arise. Together, the teacher and students can decide how to deal with such questions.

Not all young people participate in sexual relations. Many choose abstinence, which is a safe and healthy choice. It is a choice which needs to be honored and encouraged. However, many young people are sexually active. These materials were written to help <u>all</u> young people to prevent the risk of AIDS infection.

CONCEPTS

AIDS is a health issue and should be addressed as a health issue.

- AIDS is a communicable disease caused by a virus and is incurable at the present time.

- AIDS is not casually transmitted. People will not contract AIDS in normal day to day contact with infected people.

- There is a continuum of infection with the AIDS virus.

- Under certain circumstances, anyone can be infected by the AIDS virus.

- Individuals must take responsibility for protecting themselves from exposure to the AIDS virus and preventing its spread. As yet, there is no immunization or cure for AIDS. **The only form of protection and control is prevention education.**

IMPLEMENTATION & INTEGRATION

- Incorporate AIDS education into health/science curriculum grades four through eight.

- Implications and effects of AIDS will be integrated across the curriculum where appropriate; e.g. civics, art, history, economics, psychology, English, math and physical education.

- Some suggestions for subject areas:

HEALTH

Substance Abuse
Consumer Health
Communicable Disease Prevention
Community Health
Family Health
Mental Health

HOME ECONOMICS

Family Life
Child Development
Consumer Education
Community Services

SCIENCE

Research/Scientific Method
Infectious Agents
Genetic Mutation
Body Systems: Circulatory, Reproduction, Immune

SOCIAL STUDIES

Family Life
Economics
Public Policy
Media Influences
Community Services

PHYSICAL EDUCATION

Healthy Habits
Hygiene and Transmission Myths
Self Esteem and Values

- Many issues are raised in non-sexual discussions of the effect of AIDS on people. These include civil rights as well as the economic impact of the disease. Some of these are highlighted as follows:

CIVIL RIGHTS AND AIDS

SCHOOLS AND AIDS

Some students infected with HIV* have not been allowed to attend school, even if their health was good enough to allow them to attend.

- Should a student infected with HIV be allowed to attend school? Under what circumstances?
- How would you feel about a classmate if you knew he/she was infected with HIV?
- Should teachers who are HIV infected be allowed to teach?
- How would you feel about a teacher if you knew he/she had AIDS?
- Should other school personnel (janitors, cafeteria workers, administrators, counselors, nurses) be allowed to work if they are infected with the AIDS virus?
- Some parents have insisted they have a right to know if their children are attending a school with another child who is HIV infected. Should parents be informed under these circumstances?

  Note: Informing parents of HIV infected children would violate the privacy of the child with AIDS and his/her family, and would be illegal.

EMPLOYER/EMPLOYEE RELATIONS

Some employers have fired people with AIDS, or ARC, or people whom they suspect of having AIDS.

- If an employer is concerned about risks to other employees, is this a legitimate reason to fire someone infected with the AIDS virus?
- What if a business owner believes that the presence of someone infected with the AIDS virus is hurting business because customers are fearful? Would you go to a store/restaurant that employed someone infected with the AIDS virus?

SERVICES FOR PEOPLE INFECTED WITH THE AIDS VIRUS

Some people think those people who are HIV infected should be restricted in certain activities of their lives; others believe they should be able to live their lives as freely as anyone else.

- Should people with AIDS be free to ride public buses? Eat in public places? Work at their usual jobs? Is there any work you can think of that a person with AIDS should not be allowed to do?

* See page 68

- Should people with AIDS needing hospitalization receive care in traditional hospitals?

- Should a parent with AIDS be allowed to continue to live and care for children who are not affected with the disease?

  Note: There has never been a documented case of casual transmission, or of familial transmission without sexual contact, such as occurs between husband and wife, being implicated. Occasional reports of casual transmission have <u>all</u> failed to be substantiated.

- Should a child with AIDS be allowed to stay in the home if there are other, uninfected children in the home?

  Note: There has never been a documented case of sibling transmission.

- A man with ARC was seen several times in a city Sexually Transmitted Disease clinic for treatment of gonorrhea, and has admitted being sexually active with a number of partners weekly. He was probably passing the virus on to others. Should his activities be restricted in some way? If so, how?

- Occasionally, there have been suggestions of quarantining people with AIDS in some way to slow or stop the spread of the disease. Is this a good idea? What about the civil liberties involved? Is there a practical way to quarantine large numbers of people?

  Note: Most people diagnosed with AIDS are conscientious about not putting others at risk. They do not practice unsafe sex or share IV needles, donate blood, etc. The much larger risk would be from people who are carrying the virus but do not show signs of illness. These people appear healthy and may remain healthy, and may not know they are infected, but are capable of passing the virus on.

ECONOMIC IMPACT OF AIDS

HEALTH INSURANCE AND AIDS

- Treatment of people infected with the AIDS virus is very costly. Should people in "High Risk" groups be denied traditional health insurance? Should such health insurance cover experimental treatment for AIDS?

MEDICAL CARE OF AIDS PATIENTS

- Who should support costs of medical care: city, county, state or federal government, private insurance, private organizations, families, etc.?

GOALS

To Communicate:

- The importance of individual responsibility for prevention.
- Basic information about communicable diseases.
- Basic information about the AIDS virus: the agent of infection, effects on the immune system, how it replicates, the continuum of the disease and physical manifestations.
- How an individual can reduce or eliminate the risk of contracting the AIDS virus.

OBJECTIVES

I. Students will understand the importance of individual responsibility for prevention.

II. Students will understand basic information about communicable diseases.

III. Students will understand basic information about AIDS.

IV. Students will understand how to reduce or eliminate the risk of contracting AIDS.

OBJECTIVE I

	Grades 4/5	6	7/8
I. Students will understand the importance of individual responsibility for prevention			
Decision-making process Problem definition	Basic Concepts	Inter-mediate Concepts	Advanced Concepts
Self-esteem	↓	↓	↓
Value clarification	↓	↓	↓
Family values	↓	↓	↓
Choices and consequences	↓	↓	↓
Peer pressure	↓	↓	↓
Personal assertiveness	↓	↓	↓
Respect for others	↓	↓	↓
Community resources	↓	↓	↓

OBJECTIVE I Individual Responsibility for Prevention

TARGET: Grades 4/5, 6, 7/8

It was the consensus of the writing team that there are many resources available to meet this objective, and many school districts have prevention education programs with components which address the same issues. It is therefore recommended alignment with such programs where they exist in the local curriculum, or such a program be adopted to meet this objective.

This curriculum was developed with activities and sequence of activities to reflect the goals and objectives on page eight. For this objective the instructor needs to refer to the objective content on page nine to assure the students have been exposed to the skills necessary for Objectives II, III, and IV.

Recommended Resources:

- State recommended texts in Health Education.
- Health Skills for Life (K-12 Health Education Curriculum)
  20 East 13th Avenue, Eugene, Oregon 97401
- Network Publications, 1700 Mission Street, Suite 203, P.O. Box 1830, Santa Cruz, CA 95061-1830.

  (Grades 2-6) Project Self-Esteem.

  (Grades 4-6) Family Life Education, Resources for the Elementary Classroom.

  (Grades 7-8) Challenges: A Young Man's Journal for Self Awareness.

  (Grades 7-8) Choices: A Teen Woman's Journal for Self Awareness.

  (Grades 7-8) Family Life Education: Curriculum Guide.
- Presentations for School/Youth/Community:

  Pyramid Alternatives, (415) 355-8787

  Peer Resource Project, San Mateo County Health Department, (415) 573-3417
- Substance Abuse Prevention Programs that address Objective I:

  Here's Looking at You, Too, contact Pyramid Alternatives,
  480 Manor Plaza, Pacifica, CA 94044
  (Funded by state)

  Decide Program, contact Project Pegasus,
  703 Welch Road, Palo Alto, CA 94304

  Quest, contact your local Lions Club

OBJECTIVE I Grades 4/5, 6, 7/8

Audio-Visual Aids — Available from San Mateo County Office of Education Media Services

CATALOG NUMBER	TITLE	GRADES
1101	VALUES: THE RIGHT THING TO DO	2-5
1089	VALUES: BEING FRIENDS	2-4
766	WHAT IF?	4-6
4876	BETTER SAFE THAN SORRY	4-7
9301	HOW DO YOU TELL?	2-6
1347	JIMINY CRICKET, THE PROBLEM SOLVER	3-6
866	FAMILIES GET ANGRY	4-6
4592	RESPONSIBILITY: WHAT ARE YOUR LIMITS?	6-8
6089	DECISIONS	7-12
933	DIVIDED MAN: COMMITMENT OR COMPROMISE	6-8

All of the above audio-visual materials deal with sensitive issues. It is recommended that you have District approval for classroom use.

OBJECTIVE II

Grades 4/5 6 7/8

II. Students will understand basic information about communicable diseases			
Infecting organisms	Basic Information	Review Basic Information	In Depth
Modes of transmission	↓	↓	↓
Protection	↓	↓	↓
Control	↓	↓	↓
Prevention	↓	↓	↓

OBJECTIVE II - AIDS: BASIC INFORMATION ABOUT COMMUNICABLE DISEASES

Target: Grades 4/5

Purpose: To provide basic information about communicable diseases, infectious organisms, modes of transmission, protection from diseases, control of diseases and methods of prevention of disease.

Objective: Students will understand basic information about communicable and non-communicable diseases.

Suggested Format:
1) Lecture/discussion.
2) Activities and exercises.

Materials:
1) Lecture - Communicable Diseases "Fact Sheet."
2) Handwashing - how and why.
3) Handwashing sign.
4) Handshaking exercise.
5) Art exercise.
6) True/False activity on disease spread.
7) District curriculum guides in science and health.

Time: Two 40-minute sessions (minimum).

Utilization (How): Using class science and health texts, and other materials with basic information about communicable diseases, provide the class with a series of questions, lectures, discussion and interdisciplinary activities (role playing, creative writing, games, etc.) to present basic information about how diseases are transmitted.

BASIC COMMUNICABLE DISEASES INFORMATION FOR INSTRUCTION

The two classifications of disease are communicable and noncommunicable. Communicable diseases are spread from person to person or from the environment to person. Noncommunicable diseases are inherited or result from environmental conditions and poor health habits.

Many types of microorganisms cause communicable diseases. The microorganism that causes AIDS is a virus. Viruses are so small that many of them can fit inside a cell. Viruses grow only inside a living cell. When a virus enters the body, it goes into a cell. The virus then becomes part of the cell's chromosomes, and the cell begins to produce the viruses. When the cell is full of viruses, it bursts and viruses spread to other cells in the body. The process is repeated. Examples of common diseases caused by viruses are flu, hepatitis, and chicken pox.

Communicable diseases are spread when microorganisms move from an infected person to a previously non-infected person. Microorganisms can be spread in different ways through air, water, food, animals, insects, and directly from person to person. Sometimes people have harmful microorganisms in their bodies and do not feel ill or show any signs of illness. They can, however, pass these microorganisms to others, who then may become sick. Since these people "carry" the microorganisms without becoming sick themselves, they are known as human carriers.

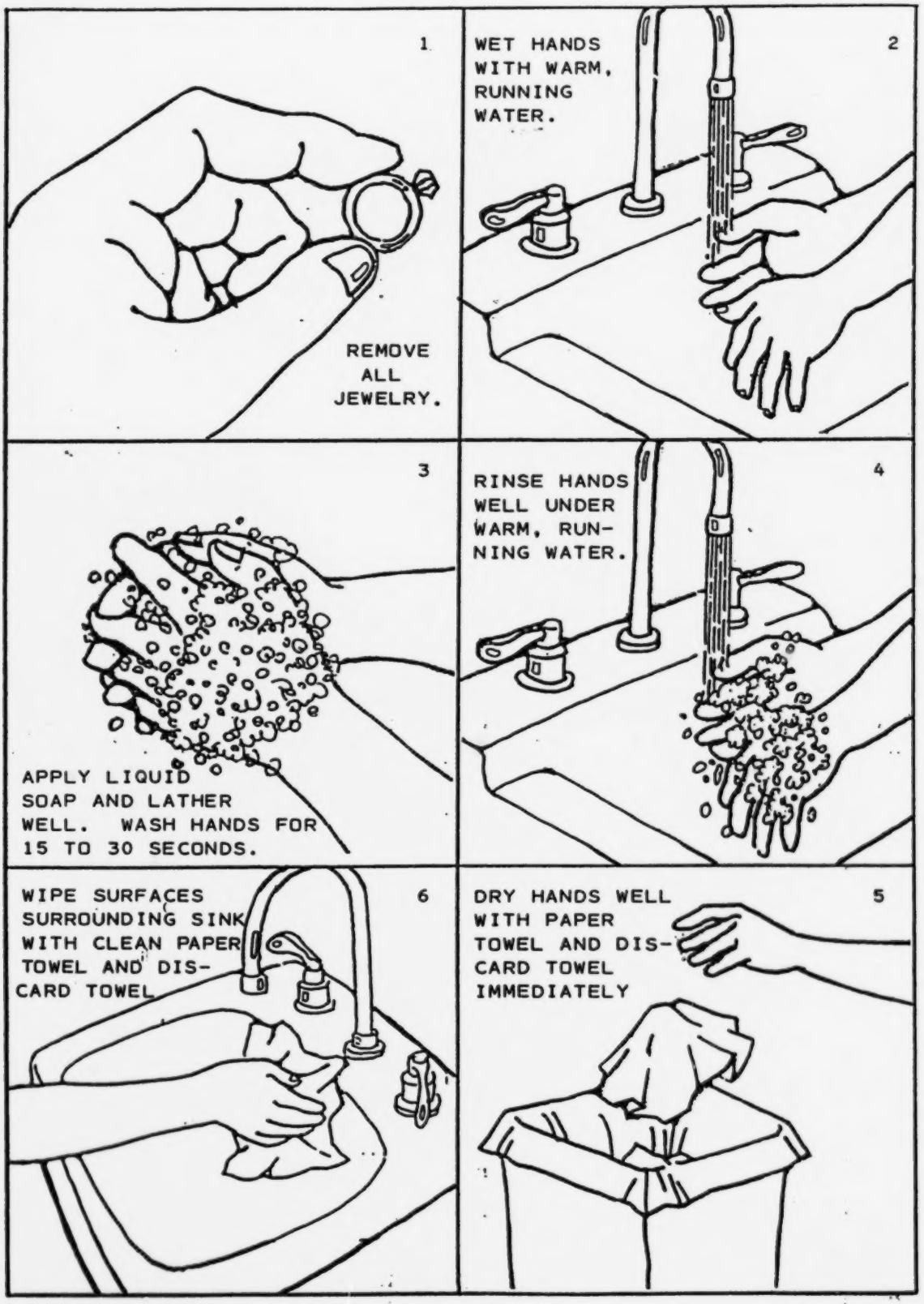
Communicable diseases that are spread from person to person by close, intimate body contact are called sexually transmitted diseases. Sexually transmitted diseases are classified as communicable diseases. One method of the spread of AIDS is through sexual contact between people.

The body fights communicable diseases by outer and inner defense systems.

> Outer defenses: The outer defenses prevent microorganisms from entering the blood and reaching cells. Most important is the skin. Skin also produces sweat which kills some microorganisms. The inner linings, special skin cells of the respiratory, digestive and reproductive systems, are called mucous membrane and produce mucous. Mucous can trap microorganisms. Tears protect the eyes.
>
> Inner defenses: When microorganisms get past the outer defenses, they enter the blood and body cells. This causes an infection. When an infection occurs, the body's inner defenses work to fight it. The white blood cells are special cells in the blood that fight infection. Some white cells produce antibodies that neutralize invading microorganisms. Others produce chemicals that kill them directly. Certain white blood cells regulate the functioning of the entire immune system. The body's ability to develop immunity is an important part of the body's defense against disease.

Adapted from: "Teaching AIDS," Marcia Quackenbush and Pamela Sargent, Network Publications, ETR Associates, Santa Cruz, CA

HAND WASHING TECHNIQUES FOR PREVENTION OF INFECTIOUS DISEASES

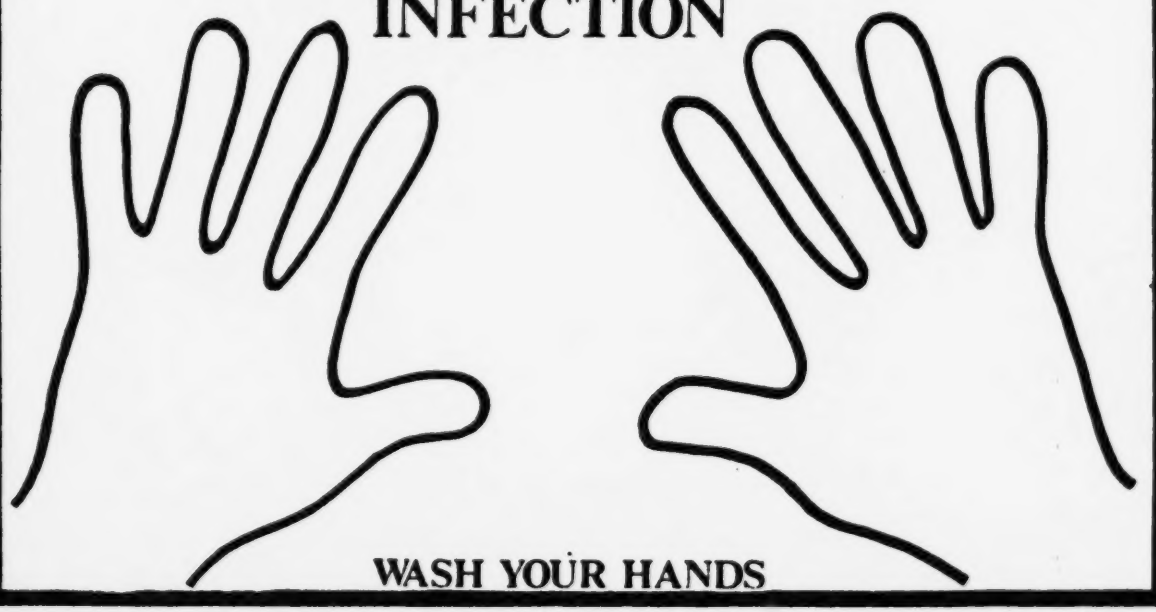

1
REMOVE ALL JEWELRY.
2
WET HANDS WITH WARM, RUNNING WATER.
3
APPLY LIQUID SOAP AND LATHER WELL. WASH HANDS FOR 15 TO 30 SECONDS.
4
RINSE HANDS WELL UNDER WARM, RUNNING WATER.
6
WIPE SURFACES SURROUNDING SINK WITH CLEAN PAPER TOWEL AND DISCARD TOWEL
5
DRY HANDS WELL WITH PAPER TOWEL AND DISCARD TOWEL IMMEDIATELY

FROM: "TECHNIQUES FOR PREVENTING THE SPREAD OF INFECTIOUS DISEASES"
CALIFORNIA STATE DEPARTMENT OF EDUCATION

The ten most common causes of
INFECTION

WASH YOUR HANDS

The ten most common causes of
INFECTION



WASH YOUR HANDS

OBJECTIVE II Grades 4/5, 6, 7/8

ACTIVITY: Handshake

DIRECTIONS: Before class, ask two students to volunteer to be people who have a rare communicable disease that is spread by direct hand-to-hand contact. When the class begins, ask the two students to stand and each shake hands with three other students. Then each of those six students is to shake hands with three other students and so on. When the handshaking is over, have all students take their seats. Then ask the original two students to stand again, and the students who shook hands with the original two students to stand again, and so on until the entire class is again standing. Then announce that you have just been informed that the original two students have a rare communicable disease that is spread by direct hand-to-hand contact and that it looks like everyone in the class has been exposed. Tell the class that they are fortunate, it is cured by good old soap and water!

NOTE TO TEACHER: This activity is intended to help students visualize how communicable diseases are spread and is not intended to relate to AIDS transmission directly.

Adapted from California State Guide on Sexually Transmitted Diseases

OBJECTIVE II Grades 4/5

ACTIVITY: What does a disease do?

STUDENT DIRECTIONS: Draw a cartoon or picture that shows a health problem or how to prevent a health problem caused by an infection of virus or bacteria.

RESOURCES: Basic texts in Health and Science, library resources, newspaper and magazine articles.

NOTE TO TEACHER: This activity is intended to reinforce basic knowledge of the disease process.

SUGGESTIONS: Display mounted art work in the classroom.

OBJECTIVE II Grades 4/5

Activity: How germs are spread

Student Directions: What do you know about how diseases are spread?

Answers: T = True
F = False

____ 1. Washing cuts and scrapes will not prevent infection.

____ 2. You can be vaccinated against the common cold.

____ 3. Malaria is a communicable disease spread by mosquito bites.

____ 4. You can catch chicken pox from a friend if he or she sneezes or coughs near you.

____ 5. You can get communicable diseases from some uncooked foods.

____ 6. Spoiled food just tastes bad; you cannot get a communicable disease from it.

____ 7. You can become infected from cuts and scrapes while playing on the school grounds.

____ 8. You cannot get diseases from drinking river and pond water.

Note to teacher: This activity is intended to reinforce communicable disease prevention and control.

Suggestions: Have students retain completed activity and self correct as a discussion activity.

Key: 1-False, 2-False, 3-True, 4-True, 5-True, 6-False, 7-True, 8-False.

OBJECTIVE II AIDS: BASIC INFORMATION ABOUT COMMUNICABLE DISEASES

Target: Grade 6

Purpose: To provide basic information about communicable diseases, infectious organisms, modes of transmission, protection from diseases, control of diseases and of methods of prevention of disease.

Objective: Students will understand basic information about communicable and non-communicable diseases.

Suggested Format:
1) Lecture/discussion ("key words" vocabulary).
2) Activities and exercises.

Materials:
1) Lecture aid - Communicable Diseases "Fact Sheet."
2) Activities - write COMMUNICABLE DISEASE on the board and ask students to define it in their own words.
3) Handshake activity. (See Objective I, Grades 4/5, attachments.)
4) Handwashing - how and why. (See Objective I, Grades 4/5, attachments.)
5) Handwashing sign. (See Objective I, Grades 4/5, attachments.)
6) Causes of disease.
7) How diseases are acquired - small group.
8) Additional resources. (See Objective I, Grades 4/5, attachments.)

Time: Three 40-minute sessions.

Utilization (How): Using class science and health texts and other materials with basic information about communicable diseases, provide the class with a series of questions, lectures, and discussion and interdisciplinary activities (role playing, creative writing, games, etc.), to present basic information about how diseases are transmitted.

OBJECTIVE II Grade 6

ACTIVITY: Causes of Disease. What do you know?

STUDENT DIRECTIONS: Answer T = true
F = false

1. _____ How a person eats, exercises, rests, can prevent diseases.
2. _____ There are few treatments for infectious diseases.
3. _____ Many diseases can be controlled or prevented.
4. _____ All diseases can be avoided.
5. _____ Future technology could be a cause of new diseases because of associated pollution.
6. _____ Heart disease is the leading cause of death in the United States.
7. _____ You have some control over the disease-causing factors in the environment, water and food.
8. _____ You have considerable control over disease-causing factors associated with contact with infected people.
9. _____ You have some control over a disease you have inherited.
10. _____ Most serious diseases are caused by body systems not functioning as they should.

NOTE TO TEACHER: This activity is intended to impart basic knowledge of disease.

SUGGESTIONS: Have the students answer individually and retain activity sheets. Correct through class discussion.

KEY: 1. T 2. F 3. T 4. F 5. T 6. T 7. T 8. T 9. F 10. T

OBJECTIVE II - Grade 6

Activity: How diseases are acquired

1. Why is the common cold considered a communicable disease? How can we prevent colds?

2. What effect can polluted water have if swallowed or used for swimming? How do we prevent pollution in our drinking water and swimming pools?

3. How might insects cause disease in people? How do we control/prevent such transmission?

4. How might polluted air cause diseases in people? How do we protect ourselves from such diseases?

5. How might spoiled food cause diseases in people? How do we protect ourselves from such diseases?

Note to teacher: This activity is intended to reinforce knowledge of the common modes of transmission and spread of communicable diseases.

Suggestions: Have students form groups of five or six and choose a recorder to respond to an assigned question. Have group spokesperson present responses to the entire class for discussion.

OBJECTIVE II AIDS: BASIC INFORMATION ABOUT COMMUNICABLE DISEASES

Target: Grades 7/8

Purpose: To provide basic information about communicable diseases, infectious organisms, modes of transmissions, protection from diseases, control of diseases and methods of prevention of disease.

Objective: Students will understand basic concepts of communicable and non-communicable diseases.

Suggested Format:
1) Lecture/discussion.
2) Activities and exercises.
3) Role play.

Materials:
1) Lecture - Communicable Disease "Fact Sheets."
2) Handwashing - how and why. (See Objective I, Grades 4/5, attachments.)
3) Handwashing sign. (See Objective I, Grades 4/5, attachments.)
4) Handshaking exercise. (See Objective I, Grades 4/5, attachments.)
5) Role play activity.
6) Crossword.
7) Research papers.
8) District texts in Health and Science

Time: Three 40-minute sessions.

Utilization (How): Using class science and health texts and other materials with basic information about communicable diseases, provide the class with a series of questions, lectures, discussion and interdisciplinary activities (role playing, creative writing, games, etc.), to present basic information about how diseases are transmitted.

OBJECTIVE II Grades 7/8

ACTIVITY: Role Play

DIRECTIONS: Set up a role play situation as follows:

Indicate to the class that the purpose of this activity is to consider the implications of coming in contact with people who have different diseases.

Two student volunteers must deliver mail and magazines to patients in four hospital rooms. They may work together, or take a few rooms apiece. All that is known about the patients in the four rooms is that they have or have had one of the following disease or condition:

Cancer	Heart Disease
AIDS	Hepatitis

Note: During any role play situations, it is important to maintain a classroom atmosphere that is open and respectful.

Ask the two students to play the parts in the role play. Their task is to discuss and mutually agree on who is to visit a patient with one of the above disease condition. In their discussion, students should say why they would or would not want to visit a patient in any given room.

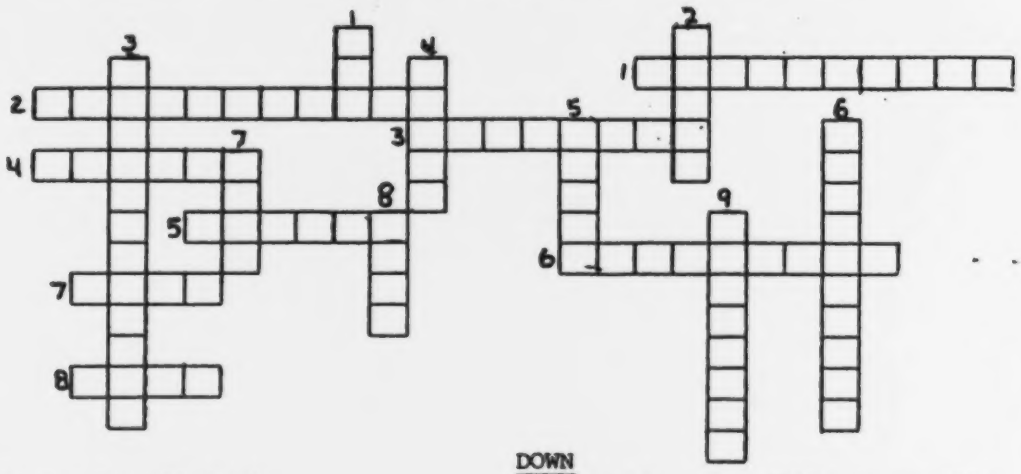
After the role play, explain to students that while some of these diseases are communicable, there would be no risk of contracting any of these diseases while delivering mail. Ask class members to consider the possibility of the social stigma related to certain diseases, when there is no health risk to others.

NOTE TO TEACHER: This activity is intended to reinforce knowledge of communicability of diseases.

Adapted from California State Guide on Sexually Transmitted Diseases

OBJECTIVE II Grades 7/8

ACTIVITY: Crossword: Signs and Symptoms of Being Well or Being Ill



ACROSS

1. When back of mouth hurts
2. Hotness or coldness of body checked with thermometer
3. Throwing up
4. Upset stomach
5. Cold and shivering
6. Feeling sad, feeling bummed
7. Refers to color of cheeks when they look white
8. Sore throat, cough, sneeze means you have a _____

DOWN

1. Stomach _____(illness usually involving vomiting)
2. Other words for this are hack and bark
3. A "shot" to prevent disease
4. A high temperature
5. Feeling sleepy
6. Stuffy nose
7. Feeling stiff and sore all over
8. Not well
9. When your head hurts

CROSSWORD WORD LIST

Achy	Pale	Temperature	Cough	Nausea
Fever	Headache	Sore Throat	Tired	
Cold	Congestion	Depressed	Chills	
Vomiting	Immunization	Flu	Sick	

NOTE TO TEACHER: This activity is intended to reinforce the concepts of illness and wellness.

Suggestion: Have students complete the activity alone or in groups or with family members at home. To assist, you may provide some letters in the crossword puzzle.

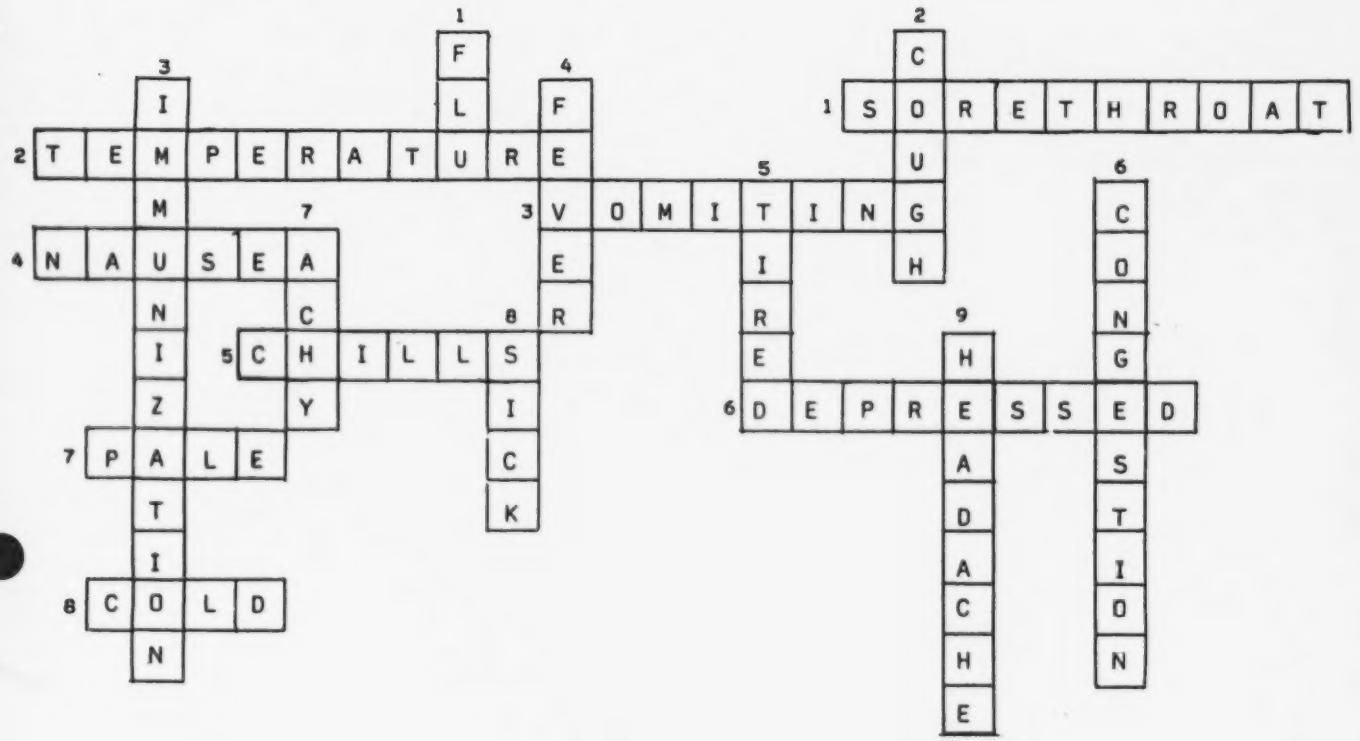
KEY: See next page.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986

OBJECTIVE II Grades 7/8

KEY

ACTIVITY: Crossword: Signs and Symptoms of Being Well or Being Ill



OBJECTIVE II - Grades 7/8

Activity: Individual Research Papers on Basic Disease Information

1. Research two scientists who made discoveries about communicable diseases.
2. Research the body defenses against disease.
3. Research ways disease may be spread through food.
4. Research ways disease may be spread through insects.
5. Research ways disease may be spread through rodents.
6. Research ways disease may be spread through water.
7. People of different countries are infected with different diseases. Select a country and describe a disease that affects that country.
8. Select three careers involved in prevention. Include the following in your report: name of career, training required, what the person does.
9. Research three ways to protect yourself from disease and three ways to avoid spreading disease.
10. Research how a vaccine works.
11. Research three types of organisms that cause disease in humans. Include the following in your report: the disease caused, how they infect, symptoms of disease, treatment/cure, prevention measures.
12. Research three drugs which help prevent the spread of communicable diseases.
13. Research three good health habits and discuss how they help prevent disease.
14. Research three ways the Food and Drug Administration prevents the spread of communicable diseases.
15. Collect current news articles about new treatments and cures for diseases. Use information to write a medical newsletter for magazine.

Note to teachers: This activity is intended to expand the knowledge of the effect of disease on society.

Suggestions: May be used as oral reports.

OBJECTIVE III

	Grades 4/5	6	7/8
III. Students will understand basic information about AIDS			
Definition of AIDS Information about AIDS	Basic Information	Review Basic Information	In Depth
History of disease	↓	↓	↓
Definition of virus	↓	↓	↓
Effects on immune system	↓	↓	↓
Continuum of infection: HIV, ARC, AIDS	↓	Basic Information	Basic Information
Incubation period	Respond to questions only	Basic Information	Basic Information, Respond to questions
Modes of transmission	Introduction	Review Basic Information	In Depth
Signs and symptoms	Respond to questions only	Basic Information	Review Basic Information
Course of disease	Respond to questions only	Basic Information	Review Basic Information
Opportunistic infections	Basic Information	Review Basic Information	In Depth

OBJECTIVE III (continued)

Grades	4/5	6	7/8
Treatment	Basic Information	Basic Information	Basic Information
Facts and fallacies	Questions & Answers	Questions & Answers	Questions & Answers
Research	Current Resources	Basic Information	Basic Information

OBJECTIVE III BASIC INFORMATION ABOUT AIDS

Target: Grades 4/5

Purpose:
1) To define what AIDS is and examine the history of the disease.
2) To define "virus" and discuss the effects of the AIDS virus on the immune system.
3) To define opportunistic diseases.
4) To briefly describe AIDS patient care.
5) To investigate facts and fallacies about AIDS.
6) To review recent research.

Objective: Students will understand basic information about AIDS.

Suggested Format:
1) Lecture/discussion ("key words" vocabulary, facts, etc.).
2) Written exercise.
3) Activities: worksheets, fill-ins, word find.
4) Interdisciplinary activities (math, art, music, drama).

Materials:
1) Activities worksheets (word find).
2) Fact Sheet, AIDS.
3) Fact Sheet, AIDS Affect on the Immune System.
4) Red Cross pamphlet, "AIDS and Children."
5) Pre-test.
6) Word Find.
7) Magic Square.
8) Who is at Risk.

Time: 40-minute session minimum.

Utilization (How): Present class with lecture/discussion, written exercises and worksheets, incorporate into interdisciplinary studies (English, Social Studies, Music, Math, Drama) and role playing exercises.

AIDS INFORMATION FOR INSTRUCTION

AIDS -ACQUIRED IMMUNE DEFICIENCY SYNDROME

Acquired - a disorder or disease not inherited or congenital.
Immune - referring to the immune system, the body system that provides resistance to infectious diseases and cancer.
Deficiency - not enough of or loss of ability.
Syndrome - a group of symptoms particular to one disease or disorder.

Causative Agent: HIV, Human Immunodeficiency Virus (also known as HTLV III, Human T-cell Lymphotropic Virus III, and LAV, Lymphadenopathy Associated Virus), invades the genetic core of T-cells or T-lymphocytes in the immune system and destroys the ability to resist other infections the immune system would ordinarily resist. These infections are called opportunistic infections. HIV can also infect the central nervous system, resulting in dementia and impaired motor function.

Transmission

- **Sexual Contact:** through exchange of infected body fluids such as blood, semen or vaginal secretions during vaginal, anal and oral sexual practices). It is not clear if transmission by urine or feces is possible.

- **Blood Contact:** through transfusions of infected blood and blood products before 1985 (blood is now tested for HIV antibodies and donors are carefully screened for high risk behaviors). Through sharing of unsterilized needles, as in street drug use, or any blood contaminated, needles, as in ear piercing, tattooing or acupuncture.

- **Infected Mother to Child:** through the placenta to the fetus, or during birth.

Careful documentation of all known cases indicates that the HIV is transmitted from person to person by blood or exchange of sexual fluids. Although the HIV is occasionally present in tears and saliva, there is no documented evidence of transmission through these body fluids, by mosquitoes or other insect bites, or through casual social or family contact by or with:

kissing	handshaking	food preparation
hugging	toilet seats	coughing
towels	sharing food	sneezing
hot tubs	swimming pools	chewed pencils
elevators	athletic equipment	car sharing

Transmission is possible by sharing toothbrushes and razors only if contaminated blood from an HIV infected person is introduced through a break in the skin or mucous membrane.

- **HIV Positive** (Antibody positive, Seropositive): Antibodies to the HIV are present in the blood, indicating that the individual has been exposed to the HIV and presumably is infected. There may be no signs or symptoms of illness. Many people who are HIV Positive will go on to develop ARC or AIDS; what proportion of infected individuals, or whether all infected persons will eventually become sick, is not yet known. This virus was identified as recently as the late 1970's; estimates of the proportion of HIV Positives who will become sick are changing as the history and nature of the disease are followed for a longer period of time.

  The incubation period for those who do progress to AIDS or ARC can vary from 3 months to 10 years or longer. HIV Positive people <u>are</u> <u>capable</u> of transmitting the virus to others.

  Symptoms: None other than positive serology.

- **ARC** (AIDS-Related Complex): Affected people are HIV positive with suppression of the immune system caused by the infection, but are not diagnosed with one of the specific illnesses required for a diagnosis of AIDS. This is a chronic condition of varying severity with symptoms similar to, but usually less severe than, AIDS. It is sometimes fatal in itself and can be a precursor of AIDS.

  Symptoms: Vary from person to person. May include persistent lymphadenopathy (swollen lymph glands) and thrush (white patches in mouth and throat), chronic fatigue, fever of over two weeks duration, night sweats, protracted diarrhea, dramatic unexplained weight loss, persistent dry cough, easy bruising/bleeding, dementia.

  Note: These symptoms occur with other disorders but they are persistent and protracted with ARC.

- **AIDS** (Acquired Immune Deficiency Syndrome): At present, a fatal disease where the immune system is no longer able to resist opportunistic infections, or cancers. In order to be diagnosed with AIDS, an individual must have one or more of opportunistic infections or cancers. The course of the disease from first symptoms to death varies with individuals. Generally, the opportunistic infections or cancers are the cause of death. However, HIV can also infect the central nervous system, leading to death from neurological damage.

  Symptoms:

  1. Persistent fatigue.
  2. Persistent lymphadenopathy.
  3. Persistent fever and night sweats.
  4. Rapid weight loss for no apparent reason (more than 10 pounds in two months).
  5. Persistent diarrhea.
  6. Persistent, unexplained dry cough.
  7. Persistent white coating on tongue and throat (thrush).
  8. Easy bruising/unexplained bleeding.
  9. Persistent purple or other discolored lesions of the skin or mucus membrane (e.g. Kaposi's Sarcoma).
  10. Mild to severe dementia.

  Note: As in ARC, these symptoms occur in other disorders but are persistent and protracted in AIDS.

There is presently no proven treatment or cure for AIDS. There are experimental drugs available and world-wide research is being done for prevention of the serious stages and a cure.

The opportunistic diseases are treated with medication appropriate to the disease. Because the individual's immune system is unable to assist in fighting disease, treatment eventually is unsuccessful. Death may occur within 3 to 4 days of diagnosis, or treatment may extend life by 3 or 4 years.

High Risk Groups

In the United States certain groups are at high risk for infection.

1. Homosexual and bisexual men.
2. I.V. substance abusers.
3. Recipients of contaminated transfused blood.
4. Babies born to HIV infected mothers.
5. Sexual partners (including prostitutes) of homosexual and bisexual men, and of I.V. substance abusers.

High Risk Behavior

Studies show that certain behavior increases the risk of infection:

1. Unprotected sexual intercourse.
2. Multiple partners.
3. High risk partners.
4. Sharing I.V. equipment.
5. Anal sex, because the tissue is more fragile and thinner than that of the vagina and so more easily penetrated and torn during intercourse.

Prevention and Control

There is no successful treatment, cure or vaccine for HIV infection. Education and individual responsibility for minimizing high risk behavior are the only effective means of prevention and control.

Prevention measures include:

Sexual transmission
- o Abstinence from sexual intercourse.
- o Monogamous relations with known, trusted, uninfected partner.
- o Using condoms properly in all other sexual encounters.
- o Minimizing numbers of partners.

Blood sharing
- o Do not use I.V. drugs.
- o I.V. drug users need to know that sharing needles is extremely risky.
- o Needles and syringes can be cleaned with a solution of one part bleach and ten parts water, between users.
- o Antibody testing since March, 1985, assures minimal risk of infection from blood transfusions or receiving blood products.
- o Health care and emergency medical personnel must follow routine infection control procedures whenever there is a possibility of exposure to blood.

Neonatal Transmission

- o Women considering pregnancy who have any risk factor need to have HIV antibody tests prior to becoming pregnant.

Education and Testing

- o Effective health education for everyone, including modes of transmission and all means of prevention.
- o Voluntary antibody testing with accompanying education and counseling available for all people.

Note: Projection of diagnosed AIDS cases or spread of HIV infection are not given here, as they tend to change based on current data. Contact your County Health Department AIDS Project for current information.

HISTORY - AIDS was not recognized as a disease until 1981, when physicians on both coasts of the United States began seeing cases of Pneumocystis pneumonia (a rare and virulent type of pneumonia), and Kaposi's Sarcoma (a rare cancer of the skin), in otherwise healthy young men. The diseases, which appeared to be related to suppression of the immune system, were first seen in homosexual men in this country. Soon similar cases were reported among male and female heterosexuals who used intravenous drugs, hemophiliacs and recipients of blood transfusions, leading to the assumption that a viral agent was responsible. The agent, HIV, was identified in 1983, and blood tests to identify HIV antibodies were available for use by Spring, 1985.

The exact origin of the AIDS virus is not known. It may be a new disease appearing only recently in humans, perhaps passed from another species such as the green monkey in Africa, or from a geographically isolated group of people. Some researchers suggest that it found its way into the human population first in Africa, where in some areas medical care, disease control and Public Health reporting procedures are primitive.

The virus has since been spreading in epidemic fashion: in 1981, 316 people in the United States were diagnosed with AIDS; by April, 1987, over 34,500 cases had been diagnosed. From 1.5 to 3 million people are assumed to be infected with HIV in the United States at the present time. (July 1987)

How the AIDS Virus Affects the Immune System

The body's immune system is made up of a wide variety of different types of cells, each of which plays a specific function in combatting various types of infection. A central component of the immune functioning is a type of white blood cell called a helper T-cell (also called a T_4 cell). The helper T-cell is the "sentry" of the immune system. When it encounters a foreign organism, it mobilizes the rest of the immune components, thus leading the fight against infection.

The AIDS virus (HIV) has a particular affinity for helper T-cells. In order to cause infection, the HIV has to have access directly to a person's blood stream. It may get into the blood stream when blood, semen or vaginal secretions from an infected person come into contact with a break in the skin or mucous membrane of an uninfected person. When the virus enters the blood stream, it seeks out helper T-cells, attaches to their outer surface, then penetrates and enters the T-cells. Once inside, the HIV imposes its genetic material on the genes of the host T-cell, takes over the T-cell and reproduces itself.

The HIV and the infected T-cell may then remain quiet or dormant for months or years. The mechanism whereby the virus is activated is not completely understood. Most likely, the infected T-cell is activated by some foreign antibody to which it attempts to respond normally. Instead of activating the immune system, however, the T-cell begins to produce hundreds of viruses, which destroy the T-cell, then move out to infect other helper T-cells. Eventually, the body's supply of helper T-cells becomes so depleted that the immune system cannot function adequately. The individual then becomes susceptible to a range of opportunistic infections and cancers that individuals with normal immune systems fight off routinely. These infections eventually lead to death.

NOTE: The immune system does produce antibodies to the HIV within a few weeks after exposure. It is the presence of these antibodies which is detected by the blood test used to screen for HIV infections. Thus the presence of antibodies serves as a marker of HIV infection, but the antibodies are not effective in combatting the HIV infection.

OBJECTIVE III Grades 4/5, 6, 7/8

FIRST AID PRECAUTIONS

Wash hands with soap and water before and after completing first aid.

Always wear disposable plastic gloves when providing first aid for bleeding injuries.

Skin lesions which may ooze blood or serum should be kept covered with a dressing. Gloves should be worn when cleaning or changing dressings.

Avoid getting blood from an injured person in your mouth or eyes. If such an exposure occurs, rinse the eyes or mouth thoroughly with water and wash face with soap and water.

Clean up any spilled blood with soap and water, followed by disinfection with a freshly made solution of one part bleach to ten parts water.

Place blood-contaminated items such as gloves, bandages, and paper towels in a plastic bag, tie it closed, and put it in the garbage.

Bloody clothes and other objects need to be put in a plastic bag and sent home.

At school, record the first aid given and report any problems to your administrator.

OBJECTIVE III Grades 4/5

Student Pre-Test

What do you know about AIDS? Answers: T = True
F = False

____ 1. No one knows what causes AIDS.

____ 2. Only homosexuals get AIDS.

____ 3. There is medicine to cure AIDS.

____ 4. You can get AIDS attending school with somene who has AIDS.

____ 5. There is no vaccine for AIDS.

____ 6. Babies cannot get AIDS from mothers who are infected.

____ 7. There is a chance of catching AIDS by using drinking fountains.

____ 8. Some children got AIDS from blood transfusions.

____ 9. You can get AIDS from insect bites.

____ 10. The United States is the only place where people get AIDS.

Key: 1-F, 2-F, 3-F, 4-F, 5-T, 6-F, 7-F, 8-T, 9-F, 10-F.

OBJECTIVE III Grades 4/5

Activity: AIDS Word Find

Student Directions: Find the words listed below:

Antibody	Signs	Vaccine	Cure
T-Cell	Transmitted	Contact	Deficiency
Symptoms	Syndrome	Blood	Disease
Systemic	Virus	Germs	Acquired
Sanitation	Organism	Communicable	Immune

A	N	T	I	B	O	D	Y	Z	I	W	U	Y
C	P	Q	M	W	V	I	X	O	U	S	J	K
Q	A	C	K	B	E	P	N	M	Y	W	E	U
U	A	L	M	W	U	I	W	C	C	T	C	U
I	B	Q	V	A	C	C	I	N	E	Q	U	R
R	E	E	I	V	I	V	R	M	W	L	R	T
E	R	T	R	A	N	S	M	I	T	T	E	D
D	R	B	U	Q	S	O	J	T	O	I	W	I
Q	E	T	S	Y	M	P	T	O	M	S	C	S
I	D	R	D	K	L	R	Y	R	A	P	I	E
M	S	G	D	I	C	X	O	G	A	E	Q	A
M	Z	B	L	O	O	D	O	A	Z	M	Q	S
U	A	P	W	L	Q	B	V	N	B	Y	R	E
N	Q	P	J	H	G	S	V	I	O	I	Q	E
E	D	E	Z	W	L	K	H	S	R	E	G	H
S	P	Q	S	Y	S	T	E	M	I	C	D	R
D	O	I	A	W	V	C	E	J	K	O	S	O
E	L	M	N	Q	D	C	G	E	R	M	S	X
F	O	S	I	G	N	S	D	G	M	M	S	Z
I	P	I	T	D	R	G	S	M	C	U	Z	U
C	Z	I	A	Q	X	R	P	I	O	N	T	S
I	S	J	T	C	E	L	L	O	D	I	L	M
E	M	L	I	W	P	T	D	V	B	C	Q	S
N	M	C	O	N	T	A	C	T	D	A	R	D
C	E	W	N	N	M	I	C	Z	W	B	M	W
Y	S	O	M	Q	Z	S	T	R	M	L	P	Y
X	S	Y	N	D	R	O	M	E	Q	E	D	Z

KEY

OBJECTIVE III Grades 4/5

Activity: AIDS Word Find

Student Directions: Find the words listed below:

Antibody	Signs	Vaccine	Cure
T-Cell	Transmitted	Contact	Deficiency
Symptoms	Syndrome	Blood	Disease
Systemic	Virus	Germs	Acquired
Sanitation	Organism	Communicable	Immune

A	N	T	I	B	O	D	Y	Z	I	W	U	Y
C	P	Q	M	W	V	I	X	O	U	S	J	K
Q	A	C	K	B	E	P	N	M	Y	W	E	U
U	A	L	M	W	U	I	W	C	C	T	C	U
I	B	Q	V	A	C	C	I	N	E	Q	U	R
R	E	E	I	V	I	V	R	M	W	L	R	T
E	R	T	R	A	N	S	M	I	T	T	E	D
D	R	B	U	Q	S	O	J	T	O	I	W	I
Q	E	T	S	Y	M	P	T	O	M	S	C	S
I	D	R	D	K	L	R	Y	R	A	P	I	E
M	S	G	D	I	C	X	O	G	A	E	Q	A
M	Z	B	L	O	O	D	O	A	Z	M	Q	S
U	A	P	W	L	Q	B	V	N	B	Y	R	E
N	Q	P	J	H	G	S	V	I	O	I	Q	E
E	D	E	Z	W	L	K	H	S	R	E	G	H
S	P	Q	S	Y	S	T	E	M	I	C	D	R
D	O	I	A	W	V	C	E	J	K	O	S	O
E	L	M	N	Q	D	C	G	E	R	M	S	X
F	O	S	I	G	N	S	D	G	M	M	S	Z
I	P	I	T	D	R	G	S	M	C	U	Z	U
C	Z	I	A	Q	X	R	P	I	O	N	T	S
I	S	J	T	C	E	L	L	O	D	I	L	M
E	M	L	I	W	P	T	D	V	B	C	Q	S
N	M	C	O	N	T	A	C	T	D	A	R	D
C	E	W	N	N	M	I	C	Z	W	B	M	W
Y	S	O	M	Q	Z	S	T	R	M	L	P	Y
X	S	Y	N	D	R	O	M	E	Q	E	D	Z

Developed by Leslie Valstad, Teacher, Jefferson Elementary School District

OBJECTIVE III Grades 4/5

ACTIVITY: Who is at risk of catching AIDS

STUDENT DIRECTIONS: Draw a picture, with a short explanation, that shows how you DO NOT SPREAD AIDS.

RESOURCES: Lecture.
Basic AIDS information.
Pre-test discussion knowledge.
Communicable disease knowledge.

NOTE TO TEACHER: This activity is intended to reinforce basic AIDS information.

SUGGESTIONS: Display mounted artwork in classroom.

OBJECTIVE III Grades 4/5

ACTIVITY: Magic Square

STUDENT DIRECTIONS: Choose the word that best completes each sentence. Then place the number of that word in the appropriate box on the magic square. When you have filled in all the squares with a different number, add up each column, each row, and two diagonals. They should be the same number.

A. AIDS (Acquired Immune Deficiency Syndrome) is a disease that breaks down the body's _____ _____, and ability to fight disease.

B. A person with AIDS is vulnerable to life _____ _____ that do not affect people with normal immunity.

C. AIDS is caused by a _____ that infects and damages cells of the immune system.

D. AIDS is a _____ _____ disease and is not spread by casual contact.

E. AIDS is most often spread by sexual contact, sharing dirty needles, or _____ from infected mother to newborn infant.

F. The _____ of AIDS transmission through transfusion is very small.

G. Of the first 20,000 AIDS cases in the U.S., fewer than _____ were children.

H. The AIDS virus is _____ and cannot survive outside the body. It can be killed by common disinfectants, including bleach.

I. AIDS is not spread through _____ _____; everyday activities like attending school, eating in restaurants, swimming in public pools, shaking hands, hugging, or other _____ _____. It is not spread by coughing or sneezing.

A	B	C
D	E	F
G	H	I

(Answer) Word Choices:

1. threatening illnesses
2. 300
3. risk
4. casual contact
5. transmitted
6. immune system
7. blood borne
8. virus
9. fragile

NOTE TO TEACHER: This activity is intended to reinforce the major facts about AIDS.

KEY: A. (6) immune system
B. (1) threatening illnesses
C. (8) virus
D. (7) blood borne
E. (5) transmitted
F. (3) risk
G. (2) 300
H. (9) fragile
I. (4) casual contact

MAGIC NUMBER-15

Adapted by: Leslie Valstad, from Richard E. Kime, Richard G. Schladt, and Leonard E. Fretsch, Health Instruction: An Action Approach, Prentice Hall, Inc. 1977, p. 117.

OBJECTIVE III BASIC INFORMATION ABOUT AIDS

Target: Grade 6

Purpose:
1) To define what AIDS is and examine the history of the disease.
2) To define "virus" and discuss the effects of the AIDS virus on the immune system.
3) To define opportunistic diseases.
4) To describe briefly AIDS patient care.
5) To investigate facts and fallacies about AIDS.
6) To review recent research.

Objective: Students will understand basic information about AIDS.

Suggested Format:
1) Question box.
2) Pre-test.
3) Lecture and discussion
4) Film.
5) Activities and exercises.

Materials:
1) Anonymous question box.
2) Pre-test.
3) Vocabulary fill-in.
4) AIDS matching vocabulary.
5) Who Is At Risk exercise.
6) Film. (See Audio-Visual list.)

Time: Three 40-minute sessions.

Utilization (How): Put question box out 2-3 days before AIDS unit begins. Use the self correction of pre-test to stimulate class discussion.

OBJECTIVE III Grades 6, 7/8

Student Pre-Test

What do you know about AIDS? Answers: T = True
F = False

____ 1. No one knows what causes AIDS.

____ 2. Only homosexuals get AIDS.

____ 3. There is medicine to cure AIDS.

____ 4. The virus that causes AIDS destroys the immune system.

____ 5. Not everyone who is infected with the AIDS virus gets sick.

____ 6. The incubation period for AIDS can be four months to ten years.

____ 7. You can get AIDS attending school with someone who has AIDS.

____ 8. There is no vaccine for AIDS.

____ 9. I.V. drug users spread AIDS by sharing needles.

____ 10. One way to prevent AIDS is not to have sexual intercourse.

____ 11. People can transmit AIDS even if they have no symptoms of the disease.

____ 12. Babies cannot get AIDS from mothers who are infected.

____ 13. The AIDS virus can live a long time outside the body.

____ 14. In San Mateo County, anyone can get free AIDS testing and counseling.

____ 15. The more sexual partners you have, the greater the risk of AIDS infection.

____ 16. There is a chance of catching AIDS by using public bathrooms.

____ 17. Using condoms can absolutely prevent AIDS infection.

____ 18. Cancer is one of the diseases associated with AIDS.

____ 19. You can get AIDS from insect bites.

____ 20. The United States is the only place where people have AIDS.

Key: 1-F, 2-F, 3-F, 4-T, 5-T, 6-T, 7-F, 8-T, 9-T, 10-T, 11-T, 12-F, 13-F, 14-T, 15-T, 16-F, 17-F, 18-T, 19-F, 20-F.

OBJECTIVE III Grade 6

ACTIVITY: AIDS -Fill In Blanks

STUDENT DIRECTIONS: Use the following words to complete the sentences below. Each word is used only once.

understanding	disease	immune
blood	learn	person
flu	risky	tears
body fluids	AIDS	cure
virus	catch	cold
system		

_____ is a communicable disease. A communicable disease can be spread from _____ to person. The disease is caused by a _____. The AIDS virus is spread from person to person by sharing of _____ _____. Body fluids include _____ and semen. Other body fluids are urine, saliva, and _____. The body fluids which spread the AIDS virus are blood, semen and vaginal secretions.

The AIDS virus is different from the viruses that can cause a _____ or _____. The AIDS virus is not like the cold and flu viruses because it is more difficult to _____.

Our body's _____ system works to fight off the cold and flu. The AIDS virus is different because it attacks the body's immune _____. AIDS is a serious _____. There is no _____ for the disease. The way to prevent the spread of AIDS is to _____ about the disease and how it spreads.

After learning about how the disease is spread, then people must stop _____ behavior.

Another important thing to remember is that a person who has the AIDS virus is a person who still needs our help and _____.

NOTE TO TEACHER: This activity is intended to outline basic concepts about communicable diseases and AIDS.

SUGGESTIONS: Use as a self-study assignment or as a take-home assignment.

KEY: Order of responses: AIDS, person, virus, body fluids, blood, tears, cold, flu, catch, immune, system, disease, cure, learn, risky, understanding.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

OBJECTIVE III Grade 6

ACTIVITY: AIDS - Matching Vocabulary

STUDENT DIRECTIONS: Match the words in the left column to the correct definition in the right column. Draw lines to connect them.

1. AIDS	A. A cancer that grows relentlessly and crowds out normal cells.
2. Malignancy	B. Blood, urine, semen, saliva, and tears.
3. HIV	C. AIDS Related Complex.
4. ARC	D. Protected against disease.
5. Abstinence	E. Into a vein.
6. Virus	F. Human Immunodeficiency Virus.
7. Intravenous	G. The cells that trigger the immune system to fight off infections caused by germs and viruses.
8. Helper T-cells	H. Acquired Immune Deficiency Syndrome.
9. Body fluids	I. Something that can cause infection and disease.
10. Homosexual	J. A person who chooses a lifestyle where he/she is attracted to persons of the same sex.
11. Immune	K. Not taking part in a behavior.

NOTE TO TEACHER: This activity is intended to introduce vocabulary related to AIDS issues.

Suggestions: Use as a way to introduce or follow-up on lessons on vocabulary and concepts.

Key: 1-H; 2-A; 3-F; 4-C; 5-K; 6-I; 7-E; 8-G; 9-B;10-J; 11-D

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

OBJECTIVE III Grade 6

ACTIVITY: Who is at risk of becoming infected with AIDS?

STUDENT DIRECTIONS: Are these people at risk for AIDS? Answer (Y)=Yes, (N)=No, or (D)=Depends (Explain depends).

____ 1. Someone who goes to school with a person who has AIDS.

____ 2. Paramedics.

____ 3. Family members, etc.

____ 4. Hospital nurse or physician.

____ 5. A person who has sexual intercourse with many people.

____ 6. The unborn baby of an infected mother.

____ 7. A homosexual who practices unsafe sexual activity.

____ 8. Intravenous drug user who shares needles.

____ 9. People who use public hot tubs.

____ 10. People who have transfusions.

Answer the questions individually. Then form in groups of five to six and agree on answers. Each group presents its answers and discusses them with the class.

NOTE TO TEACHER: This activity is intended to initiate discussions about risk behaviors and variables.

SUGGESTIONS: Students might be asked to add characters to the list.

KEY:

1. N
2. N/D Paramedics.
3. N/D Family members, etc.
4. N/D Hospital nurse or physician.

(Infection possible if people involved do not practice safe procedures when handling blood from infected people.)

5. Y, 6. Y, 7. Y, 8. Y, 9. N, 10. N/D, (Infection possible before 1985)

OBJECTIVE III BASIC INFORMATION ABOUT AIDS

Target: Grades 7/8

Purpose: To provide current information that will make students aware of the disease.

Objective: Students will know basic information about AIDS.

Suggested Format:
1) Lecture on basic AIDS. (See Objective II, Grades 4/5, attachments.)
2) Pre-test.
3) Activities and exercises.

Materials:
1) Pre-test. (See Objective II, Grade 6, Pre-test.)
2) Lecture. (See AIDS Fact Sheet, Objective I, Grades 4/5.)
3) Rank the Risk exercise.
4) AIDS Information.
5) AIDS: Your Opinion.

Time: Three 40-minute sessions.

Utilization (How): Self correction of pre-test to stimulate class discussion, lecture on basic information, written exercises and activities to impress upon students the relevance of this information.

OBJECTIVE III Grades 7/8

ACTIVITY: AIDS - Rank the Risk

STUDENT DIRECTIONS: Rank from 1-10, 1 being the lowest. Who of the following has the greatest risk of contracting AIDS?

_____ Someone attending class with a person who has AIDS.

_____ Paramedic.

_____ Family members of a person who has AIDS.

_____ Someone who has many sexual partners.

_____ A homosexual who practices unsafe sex.

_____ The unborn child of an infected mother.

_____ Hospital nurse or physician.

_____ Prostitute.

_____ Intravenous drug abuser who shares needles.

_____ Hemophiliac.

Complete the exercise individually. Then form in groups of five to six and come to consensus on ranking the items. The class will be brought back together for a large group discussion.

NOTE TO TEACHER: This activity is intended to initiate discussions about risk groups and risk behaviors and variables. There are no correct answers.

SUGGESTIONS: Students might be asked to add characters to list and challenge others to rank the new variables.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

OBJECTIVE III Grades 7/8

ACTIVITY: AIDS INFORMATION: Do you agree or disagree

STUDENT DIRECTIONS: You have been hearing a lot about AIDS. Some information is accurate, some is not. Write **AGREE** next to the advice below that you think is good advice and **DISAGREE** next to the advice you consider to be bad advice. For every item with which you disagree, explain why on the lines provided.

_____ o Do not have sex with people who inject drugs. If you disagree, explain why._____
_____
_____
_____

_____ o Use condoms; they may reduce the possibility of transmitting the AIDS virus. If you disagree, explain why. _____
_____
_____
_____

_____ o Do not have sex with people who have had other sexual partners because they may have picked up the AIDS virus. If you disagree, explain why. _____
_____
_____
_____

_____ o Make sure toilet seats are clean so you will not pick up the AIDS virus. If you disagree, explain why. _____
_____
_____
_____

_____ o If you need a blood transfusion, receive blood from a family member who you are sure doesn't carry the AIDS virus. If you disagree, explain why. _____
_____
_____
_____

NOTE TO TEACHER: This activity is intended to reinforce information about AIDS transmission and prevention.

SUGGESTION: Individual or group work for class discussion, or home assignment to share with parents.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

OBJECTIVE II Grades 7/8

ACTIVITY: AIDS: Your Opinions

STUDENT DIRECTIONS: What are your feelings about how your community should deal with the problems associated with AIDS? Indicate your opinion about each item below by placing an "X" in the appropriate column. Be ready to talk about your reasoning.

strongly disagree	somewhat disagree	no opinion	somewhat agree	strongly agree		
					1.	Students who are HIV infected should be allowed to attend school.
					2.	Students who are HIV infected should be allowed to participate in athletic activities.
					3.	Students who are HIV infected attending school should be identified as having the disease.
					4.	Teachers who are HIV infected should be allowed to continue teaching.
					5.	All people should be required to have the blood test to determine if they are infected with AIDS.
					6.	People getting married should be required to have a blood test to determine if they are HIV infected.
					7.	People who are HIV infected should not be allowed to serve in the Armed Services.
					8.	Students who are HIV infected should be treated as any other student.
					9.	Only the school nurse should know about a student who is HIV infected.
					10.	A woman who is HIV infected should not be allowed to have a baby.

NOTE TO TEACHER: This activity is intended to reinforce community prevention efforts related to legal and ethical issues. This is opinion, not right or wrong issues. Knowing federal and state privacy laws will affect students' responses.

SUGGESTIONS: Have students write a position statement to support one of their opinions on the back of the paper; break into small groups and have each group write a position paper and present it to the rest of the class.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

OBJECTIVE IV

	Grades 4/5	6	7/8
IV. Students will understand how to reduce or eliminate the risk of contracting AIDS			
Abstinence	Basic Information	Review Basic Information	In Depth
Monogamy/fidelity	↓	↓	↓
Knowledge of your partner	↓	↓	↓
Condoms (safer sex)	↓	↓	↓
Don't use contaminated needles	↓	↓	↓
Personal hygiene	↓	↓	↓
Good health practices	↓	↓	↓
Myths	Questions & Answers	Questions & Answers	Questions & Answers

OBJECTIVE IV AIDS Prevention: REDUCING OR ELIMINATING RISKS

Target:	Grades 4/5
Purpose:	To communicate risk information and risk reduction guidelines and clarify that AIDS is not spread by casual contact.
Objective:	The student will understand how to reduce or eliminate the risk of contracting AIDS.
Suggested Format:	1) Lecture/discussion (vocabulary, facts, etc.). 2) Written exercises. 3) Activities and exercises. 4) Anonymous question box. 5) Interdisciplinary activities (creative writing, drama, art).
Materials:	1) Game discussion "Zig-Zag." 2) Worksheets: "risk" word scramble. 3) Anonymous question box.
Time:	Three 40-minute sessions.
Utilization (How):	Present class with answers to anonymous questions, lecture/discussion on risks, written exercises, activity sheets, and games to impress upon the students the relevance of this information.

OBJECTIVE IV Grades 4/5, 6

ACTIVITY: ZIG - ZAG

OBJECTIVE: Start discussion about a noncontroversial topic and zig from question to question until the time seems appropriate to zag (discuss) a pertinent or controversial topic. (This method is especially effective at pointing out relevance of topics.)

STUDENT DIRECTIONS: The discussion should be centered on AIDS issues the students are concerned about or interested in. The discussion should "zag" several different ways, depending on the course of the student discussion of "zigs."

EXAMPLES:

ZIG: What does AIDS stand for?
ZAG: If a relative came down with AIDS, how would you feel about it?

ZIG: Name the ways AIDS is transmitted.
ZAG: Should people with AIDS attend school?

ZIG: What is the definition of "casual contact?"
ZAG: Should people with AIDS be quarantined?

NOTE TO TEACHER: This activity is intended to encourage free classroom discussion around AIDS issues.

Adapted by: Leslie Valstad, from Richard E. Kime, Richard G. Schladt, and Leonard E. Fretsch, Health Instruction: An Action Approach, Prentice Hall, Inc. 1977, p. 117.

OBJECTIVE IV Grades 4/5

ACTIVITY: Word Scramble: AIDS Information

STUDENT DIRECTIONS: Below you will find fourteen sets of words which have to do with AIDS. After you have finished unscrambling the words, place the numbered letters on the appropriate line in the answer.

R U Q A I E D C _ _ _(3) _ _ _(6) _ _

N B O L B O D O R E _ _ _ _ _(8) _ _ _(29) _(14)

M N E I M U _(9) _ _(11) _ _ _

S A E S E D I _(15) _ _ _(16) _ _ _

S N I N R T A F U S O _ _ _ _ _(25)(17)(12) _(18)(30) _

E S T T _ _(7) _ _

T I T N C O A M N A E D _(2) _ _ _ _ _(10)(5) _ _ _ _ _

G D R U L E N E D E S _ _ _ _ _ _ _ _ _ _

A X S E U L N O C T C A T _ _ _ _ _(1) _ _ _ _(13) _ _ _ _

I E N I F C T O N _ _ _(21) _ _(20) _ _

S K I R _ _ _ _

A S A L C U O N A C T C T _ _ _ _(4) _ _ _(19) _(22) _ _(23) _

E D Y S N R O M _(24) _ _ _ _ _(31)(32)

C C F D E I I E N Y _(28) _ _ _ _ _ _ _(27) _(26)

_ _ _ _ _ _ _ _ _ _ _ _ _ _

1 2 3 4 5 6 7 8 9 10 11 12 13 14

_ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

NOTE TO TEACHER: This activity is intended to reinforce AIDS prevention information.

KEY

OBJECTIVE IV Grades 4/5

ACTIVITY: Word Scramble: AIDS Information

R U Q A I E D C: A C Q U I R E D
(Q = 3, R = 6)

N B O L B O D O R E: B L O O D B O R N E
(D = 8, R = 29, E = 14)

M N E I M U: I M M U N E
(I = 9, M = 11)

S A E S E D I: D I S E A S E
(D = 15, E = 16)

S N I N R T A F U S O: T R A N S F U S I O N
(S = 25, F = 17, U = 12, I = 18, O = 30)

E S T T: T E S T
(E = 7)

T I T N C O A M N A E D: C O N T A M I N A T E D
(C = 2, M = 10, I = 5)

G D R U L E N E D E S: D R U G N E E D L E S

A X S E U L N O C T C A T: S E X U A L C O N T A C T
(A = 1, N = 13)

I E N I F C T O N: I N F E C T I O N
(E = 21, I = 20)

S K I R: R I S K

A S A L C U O N A C T C T: C A S U A L C O N T A C T
(U = 4, C = 19, N = 22, C = 23)

E D Y S N R O M: S Y N D R O M E
(Y = 24, M = 31, E = 32)

C C F D E I I E N Y: D E F I C I E N C Y
(D = 28, N = 27, Y = 26)

A	C	Q	U	I	R	E	D		I	M	M	U	N	E
1	2	3	4	5	6	7	8		9	10	11	12	13	14

D	E	F	I	C	I	E	N	C	Y		S	Y	N	D	R	O	M	E
15	16	17	18	19	20	21	22	23	24		25	26	27	28	29	30	31	32

Developed by Leslie Valstad, Teacher, Jefferson Elementary School District

OBJECTIVE IV AIDS: REDUCING OR ELIMINATING RISKS

Target: Grade 6

Purpose: To communicate risk information for AIDS, risk reduction guidelines and clarify that AIDS is not spread by casual contact.

Objective: The student will understand how to reduce or eliminate the risk of contracting AIDS.

Suggested Format:
1) Lecture/discussion from basic AIDS fact sheet.
2) Activities and exercises.

Materials:
1) Brainstorm preventive behaviors that lower the risk of contracting AIDS. (See AIDS - Basic Information, Objective IV, Grades 4/5, attachments.)
2) Have students assist in preparing risk reduction fact sheet.
3) Word scramble: Risk factors.
4) AIDS: Fact or Myth.
5) Community education activity. (See Objective IV, Grades 7/8, Activities.)
6) Create a true/false questionnaire.
7) Contact local Health Department AIDS Project and Red Cross for free pamphlets on reducing risk. (See Apendix IV)

Time: Three 40-minute sessions.

Utilization (How): Review with class how to brainstorm and then ask students to brainstorm preventive behaviors; write list on board. Use worksheets and other activities to impress upon students the relevance of this information.

OBJECTIVE IV Grade 6

ACTIVITY: Word Scramble: (Risk Factors)

STUDENT DIRECTIONS: Below you will find eleven sets of words which deal with AIDS. After you have finished unscrambling the words, place the numbered letters on the appropriate line in the answer.

S I R K C S T F R A O _ _ _

KEY

OBJECTIVE IV Grade 6

ACTIVITY: Word Scramble: (Risk Factors)

S I R K C S T F R A O: R I S K F A C T O R S
20

O M N D C O: C O N D O M
3

O N M Y O M G A: M O N O G A M Y
8 1

E A F R S E X S: S A F E R S E X
19 16

L E E N E D S: N E E D L E S

B S E T N N E C I A: A B S T I N E N C E
18 13

U L S A X E T C A N T C O: S E X U A L C O N T A C T
6 12

R E A R I C E P N I G: E A R P I E R C I N G
5 11 7 9 10

G T O N I T A O: T A T O O I N G
14 2

R Z S R O A: R A Z O R S
17 4

S S H U R T O T H B O E: T O O T H B R U S H E S
15

A	I	D	S	-	E	L	I	M	I	N	A	T	E		T	H	E		R	I	S	K
1	2	3	4		5	6	7	8	9	10	11	12	13		14	15	16		17	18	19	20

Developed by Leslie Valstad, Teacher, Jefferson Elementary School District

OBJECTIVE IV Grades 6, 7/8

ACTIVITY: Role-Play

DIRECTIONS: Set up role-play situation as follows:

Indicate to the class that this activity is intended to help rehearse their responses to life-threatening situations with peers/friends/family, at risk.

Three students are required for this activity. One student plays the "at risk" part, one acts as a "friend" and the third is an "observer." The teacher provides sample situations:

Your friend is a drug user and you fear she/he may share needles with others. You say _ _ _ _ _ _.

Your friend is dating a person who has been sexually active with many people. You say _ _ _ _ _ _.

The students role-play the situation and then discuss the situation. The observer notes interaction and discussion for use later, when the teacher leads the whole class in discussion and evaluation of the activity.

NOTE TO TEACHER: This activity is intended to reinforce student understanding of prevention concepts, and encourage self and social responsibility for prevention.

OBJECTIVE IV Grade 6

ACTIVITY: Create a True-False Questionnaire On AIDS

DIRECTIONS: Have students create a true-false questionnaire that will disclose myths and misconceptions.

As a homework assignment have them survey a person from each of the groups:

Parents
"Senior" Citizen
High School Student
Peer (not a class member)
Teacher/Counselor/School Administrator
Young Adult

Suggestions for follow-up:

Informal class discussion of experience as a survey-taker on such a sensitive subject.

Math activity on incidence of incorrect answers by group.

NOTE TO TEACHER: This activity is intended to extend student understanding of prevention, and encourage self and social responsibility for AIDS prevention.

SUGGESTIONS: This activity should follow background instruction and other activities in Objective IV for student understanding of necessary information.

OBJECTIVE IV AIDS: REDUCING OR ELIMINATING RISKS

Target: Grades 7/8

Purpose: To communicate risk information for AIDS, to provide risk reduction guidelines and clarify that AIDS is not spread by casual contact.

Objective: The student will understand how to reduce or eliminate the risk of contracting AIDS.

Suggested Format:
1) Lecture/discussions.
2) Activities and exercises.

Materials:
1) Brainstorm preventive behaviors that would lower the risk of contracting AIDS. (See AIDS - Basic Information, Objective IV, Grades 4/5, attachments.)
2) Have students assist in preparing risk reduction fact sheet.
3) Community Education activity.
4) Commitment to Self activity.
5) Why Say No activity.
6) Peer Pressure and Sex activity.
7) Where to Go for Help activity.
8) Risk Role Play activity. (See Objective IV, Grade 6, Activities.)
9) Contact local Health Department AIDS Project and Red Cross for free pamphlets on reducing risk.

Time: Three 40-minute sessions.

Utilization (How): Review with class how to brainstorm and then ask students to brainstorm preventive behaviors; write list on board. Use worksheets and other activities to impress upon students the relevance of this information.

ACTIVITY: AIDS Prevention: Community Education

STUDENT DIRECTIONS: Your Public Health Department is developing a program to educate the community in AIDS prevention. You have been asked to help. Please answer the following questions.

- What information about AIDS is the most important for people in your community to receive?

- Why did you choose this information?

- What methods would you use to publicize this information to your community?

NOTE TO TEACHER: This activity is intended to reinforce theconcepts of prevention.

Suggestions: Organize several teams in the classroom. Have each team develop a plan for disseminating the information and present it to the rest of the class. Ask for critique of the plans, including aspects such as cost, time factors, effectiveness of reaching the target community groups, etc. Homework assignment to be done with parents, older siblings, extended family.

Adapted from: Sexually Transmitted Diseases, A Curriculum for Junior and Senior High Students. Minneapolis: Minnesota Institute and the Minnesota Department of Health, 1986.

Objective IV Grades 7/8

ACTIVITY: Commitment To Yourself

STUDENT DIRECTIONS: Pick two goals and follow them through each of the questions.

What are your goals for the next five years? The next ten years?

What will help you realize these goals?

How might casual sex prevent you from attaining these goals?

NOTE TO TEACHER: This activity is intended to relate consequences of teen-age sexual activity to mental-physical health, sociological and economic factors.

Suggestions: Use as a homework assignment to be discussed with a family member as a contributor.

Adapted from: Sex Respect, a Health Workbook for Students, by Coleen Kelly Mast, Bradley, Ill: Respect Incorporated, 1986

Objective IV Grades 7/8

ACTIVITY: WHY SAY "NO" - Fill In Blanks

STUDENT DIRECTIONS: Using the words below, complete the following statements.

pre-marital sex	casual	self
risk	pregnancy	will
sexually transmitted	no	condoms
freedom		

- The only safe birth control is _____ control.
- Sexually active teens are not free from fears about _____ _____ diseases.
- Smart people control their sexual behavior by _____ power.
- _____ sex costs too much.
- The best AIDS prevention is the word _____.
- Sexual liberation includes the freedom to say no to _____.
- Girls who are sexually active are not free from fear of _____.
- _____ are supposed to prevent pregnancy/AIDS, but don't always do so.
- The _____ you take now may eliminate your future.
- There is much confusion about what sexual _____ really is.

NOTE TO TEACHER: This activity is intended to reinforce the concept of abstention and self determination.

Suggestion: Have students return worksheets and discuss responses.

Key: order of responses: self, sexually transmitted, will, casual, no, pre-marital sex, pregnancy, condoms, risk, freedom.

Adapted from: Sex Respect, a Health Workbook for Students, by Coleen Kelly Mast, Bradley, Ill: Respect Incorported, 1986

Objective IV Grades 7/8

ACTIVITY: Peer Pressure and Sex

STUDENT DIRECTIONS: There are no right or wrong answers. Write what you think.

What are some of the pressures on teenagers to have sex?

What are some of the reasons teenagers say **NO** to sex?

NOTE TO TEACHER: This activity is intended to create an atmosphere of openness about peer pressures around sexuality.

Suggestions: Have students break up into groups: Each group should choose a recorder and a reporter, discuss the questions and report to class.

Adapted from: Sex Respect, a Health Workbook for Students, by Coleen Kelly Mast, Bradley, Ill: Respect Incorporated, 1986

OBJECTIVE IV Grades 7/8

ACTIVITY: Where to go for help

STUDENT DIRECTIONS: Many people are reluctant to seek help if they are at risk for a sexually transmitted disease. Below is a list of people and plans for assistance and support.

Rate them in order of degree of comfort a teenager would have in going for help.

Friends	School Nurse/Counselor
Father	Teacher
Mother	Member of the Clergy
Family Doctor	Sister/Brother
Anonymous Hotline	Public Health Clinic
Girlfriend/Boyfriend	A Doctor You Do not Know

NOTE TO TEACHER: This activity is intended to reinforce knowledge of prevention and control.

Suggestions: Have students form six groups, assign two of the people listed above to each group, have a recorder write down a brief reason for the group consensus on each possibility. Report group discussion to class.

VOCABULARY

ADENOPATHY	A swelling or enlargement of the lymph nodes.
ANAL (Rectal)	Pertaining to the anus, the body opening at the end of the digestive tract from which feces are eliminated.
AIDS	ACQUIRED IMMUNE DEFICIENCY SYNDROME.
ANTIBODIES	Proteins that are part of the immune system, formed in the body in response to an infectious agent, which fight disease.
ARC	AIDS Related Complex.
ASYMPTOMATIC	Showing no disease symptoms.
BISEXUAL	A person who is sexually attracted to people of both sexes.
BLOOD	The fluid circulated through the heart and vascular system, carrying oxygen and nutrients to body tissues and waste products to the excretory system.
BLOOD TRANSFUSION	To give the blood or blood products of one person into another.
COMMUNICABLE/CONTAGIOUS	Capable of being transmitted from one person to another.
CONDOMS (rubbers, safes, prophylactics)	Balloon-like latex covers put on the penis before sexual contact, to prevent pregnancy and the spread of Sexually Transmitted Diseases.
CONTACT	Touching; also a person who may have caught a disease from an infected person.
CONTINUUM OF DISEASE	Stages of severity of disease effect.
CONTAMINATED	A material or substance that has organisms capable of infecting people.
COURSE OF DISEASE	The progression of a disease from onset of symptoms to resolution.
"GAY"	See homosexual.

HEMOPHILIA	An inherited delayed clotting disorder of the blood that requires transfusions of blood or blood products to prevent abnormal bleeding.
HIV	See Human Immunodeficiency Virus.
HETEROSEXUAL	A person who is sexually attracted to people of the opposite sex.
HOMOSEXUAL	A person (female or male) who is sexually attracted to people of the same sex.
HUMAN IMMUNO-DEFICIENCY VIRUS (HIV)	Causative agent in AIDS virus which renders the body unable to protect itself from infections and certain tumors by destroying helper T-cells. It is also known to infect brain and spinal tissue.
HUMAN T-CELL LYMPHOTROPHIC VIRUS TYPE III (HTLV III)	Name formerly given by the United States researchers to the AIDS virus, see HIV.
IMMUNE	Protected against the possibility of acquiring a given infectious disease.
IMMUNE SYSTEM	The system in the body that fights off infection.
IMMUNITY	The body's natural or induced resistance to a disease.
INCUBATION	The time interval between infection with a disease-causing organism and the appearance of the first symptoms of the disease.
INFECTION	A disease caused by microorganisms such as viruses, bacteria, or fungi.
INTERCOURSE	Physical sexual contact between individuals that involves the genitalia of at least one person.
INTRAVENOUS (I.V.)	Inside the vein. Intravenous drugs are drugs that are introduced directly into the vein.
KAPOSI'S SARCOMA (KS)	A rare form of cancer characterized by persistent purplish sores on the skin.
LAV (lymphadenopathy associated virus)	Name given by the French researchers to the AIDS virus.
LESBIAN	A female who is sexually attracted to another female.
MALIGNANCY	A cancerous growth that destroys or crowds out normal tissues.
NEUROLOGIC	Pertaining to the central nervous system.

OPPORTUNISTIC INFECTIONS	Diseases caused by organisms which the healthy immune system resists.
ORAL	Pertaining to the mouth.
PARASITE	An organism that grows, feeds, and is sheltered on or in a different organism while contributing nothing to the survival of its host.
PENIS	Male organ through which urine is eliminated and semen is ejaculated.
PERSISTENT	Does not abate or go away.
PNEUMOCYSTIS CARINII PNEUMONIA (PCP)	A rare form of pneumonia, caused by a parasite in the lungs, seen in persons whose immune systems are weakened.
RESISTANCE	The ability to fight off infection.
SECRETION	A substance, not a waste product, generated from blood or body cells.
SEMEN	A viscous whitish secretion of the male reproductive organs, the transporting medium for spermatozoa and the product of ejaculation.
SEROLOGY	Having to do with blood antigen-antibody reactions.
"SHOOT UP"	Slang for introducing drugs directly into veins.
STD	Sexually transmitted disease.
SUSCEPTIBLE	Not able to fight off infection.
T-CELLS	Type of white blood cell which fights infection.
THRUSH	An infectious disease characterized by weeping white patches on painful, inflamed mucous membrane, common in mouth and throat.
TRANSFUSION	To transfer blood or blood products into a blood vessel.
TRANSMISSION	To pass on, as from person to person.
VACCINE	Weakened or killed disease organisms capable of producing immunity which is given to people to prevent infection.
VAGINA	The passageway from the uterus to the outside of a women's body through which a baby is born; receives the penis during sexual intercourse.
VIRUS	The smallest causative organism of disease, requiring another living cell to reproduce.

CALIFORNIA STATE DEPARTMENT OF EDUCATION
SCHOOL HEALTH PROGRAM

California Legal Requirements Related to Family Life and STD Education:

Note: Sections of the California Education Code are listed with brief descriptions of content. See Code for specific wording.

51202. Instruction in Personal and Public Health and Safety. Requires that the adopted course of study in elementary and secondary schools shall provide instruction in: personal and public safety and accident prevention including emergency first aid, hemorrhage control, treatment for poisoning, resuscitation techniques and cardiopulmonary resuscitation when appropriate equipment is available;...and health, including venereal disease and the effects of alcohol, narcotics, drugs and tobacco upon the human body.

51203. Instruction on Alcohol, Narcotics and Restricted Dangerous Drugs. Requires instruction upon the nature of alcohol, narcotics and restricted dangerous drugs, as defined in Health and Safety Code, and other dangerous substances and their effects upon the human system, as determined by science, shall be included in the curriculum of all elementary and secondary schools. Local governing board shall adopt regulations for placement.

51240. Excuse from Health Instruction, Family Life and Sex Education Due to Religious Beliefs. Provides that whenever any part of the instruction in "health," family life education and sex education conflicts with the religious training and beliefs and the parent or guardian of any pupil, the pupil, on written request of the parent or guardian, shall be excused from the part of the training and beliefs. As used in this section, "religious training and beliefs" includes personal moral convictions.

51550. Sex Education Courses. Provides that no governing board of a public elementary or secondary school may require pupils to attend any class in which human reproductive organs and their functions and processes are described, illustrated or discussed. If such classes are offered parents or guardians of pupils enrolled in the class must be notified in writing and provided the opportunity to request in writing that his child not attend the class. Any written or audiovisual material to be used in a class in which human reproductive organs and their functions and processes are described, illustrated or discussed shall be available for inspection by parents/guardians at reasonable times and places prior to the holding of the class and the parent/guardian notified in writing of his opportunity to review such materials. (The above section does not apply to descriptions or illustrations which may appear in a textbook, adopted pursuant to law, or physiology, biology, zoology, general science, personal hygiene or health.) Procedures for notification and penalties for willfully violating the provisions of the section are included in the code section.

51820. Venereal Disease Education Classes. Authorizes venereal disease instruction (subsequently required - see 51202). If such instruction is offered the parent/guardian must be notified in writing at least 15 days prior to such instruction and provided the opportunity to request, in writing, that his child not participate in the instruction. Parents/guardians also shall be advised of their right to inspect instructional materials used in V.D. education and provided the opportunity to do so.

60650. Personal Beliefs. Prohibits administering tests, questionnaires, surveys or examinations containing any questions about the pupil's or his parents'/guardians' personal beliefs and practices in sex, family life, morality or religion to any pupil in kindergarten or grade 1-12 inclusive, unless the parent/guardian is notified in writing and they give written permission.

10200-10203. Family Life Education Programs. Recommends that teachers providing family life education have professional preparation in that subject area. Urges the University of California and the California State Colleges to develop and expand programs of family life education as part of the elementary and secondary teacher education curriculum. Requires State Department of Education, to the extent feasible to cooperate with teacher education institutions and local school districts in development of effective inservice family life education programs.

44261. Teaching Credentials. Requires that the minimum requirements for the teaching credential also include the satisfactory completion of a unit requirement in health education, including, but not limited to, emphasis on the physiological and sociological effects of abuse of alcohol, narcotics and drugs and the use of tobacco.

51880-51921. Comprehensive Health Education. Declares need for comprehensive health education and defines it. Requires State Department of Education to prepare and distribute guidelines for the preparation of comprehensive health education plans and the State Board of Education to establish standards and criteria for evaluation of such plans. Requires State Department of Education to reimburse certificated personnel, from districts having an approved plan, for travel and expenses resulting from participation in health education inservice training programs sponsored by the Department. Excludes reimbursement for hiring substitute classroom teaching personnel. Requires State Department of Education to assist school districts in developing comprehensive health education plans and programs. Specifies functions and duties involved in assisting school districts including development of model curricula and instructional materials, identification of innovative methods of teaching health education, development of methods of evaluating the effectiveness of instruction in health, and establishment of a health education inservice training program for teachers and administrators.

AIDS WEEKLY SURVEILLANCE REPORT[1] - UNITED STATES
AIDS PROGRAM, CENTER FOR INFECTIOUS DISEASES
CENTERS FOR DISEASE CONTROL, ATLANTA, GEORGIA
JULY 6, 1987

UNITED STATES CASES REPORTED TO CDC

A. TRANSMISSION CATEGORIES[2]

	MALES				FEMALES				TOTAL			
	Since Jan 1		Cumulative		Since Jan 1		Cumulative		Since Jan 1		Cumulative	
ADULTS/ADOLESCENTS	Number	(%)	Number	(%)	Number	(%)	Number	(%)	Number	(%)	Number	(%)
Homosexual/Bisexual Male	6128	(73)	24912	(71)					6128	(68)	24912	(66)
Intravenous (IV) Drug Abuser	964	(11)	4880	(14)	271	(44)	1284	(50)	1235	(14)	6164	(16)
Homosexual Male and IV Drug Abuser	622	(7)	2864	(8)					622	(7)	2864	(8)
Hemophilia/Coagulation Disorder	93	(1)	334	(1)	1	(0)	8	(0)	94	(1)	342	(1)
Heterosexual Cases[3]	135	(2)	701	(2)	184	(30)	747	(29)	319	(4)	1448	(4)
Transfusion, Blood/Components	174	(2)	514	(1)	90	(15)	279	(11)	264	(3)	793	(2)
Undetermined[4]	293	(3)	861	(2)	67	(11)	251	(10)	360	(4)	1112	(3)
SUBTOTAL [% of all cases]	8409	[93]	35066	[93]	613	[7]	2569	[7]	9022	[100]	37635	[100]
CHILDREN[5]												
Hemophilia/Coagulation Disorder	6	(10)	27	(10)			2	(1)	6	(5)	29	(6)
Parent with/at risk of AIDS[6]	43	(72)	207	(73)	46	(81)	203	(84)	89	(76)	410	(78)
Transfusion, Blood/Components	7	(12)	39	(14)	4	(7)	23	(10)	11	(9)	62	(12)
Undetermined[4]	4	(7)	11	(4)	7	(12)	13	(5)	11	(9)	24	(5)
SUBTOTAL [% of all cases]	60	[51]	284	[54]	57	[49]	241	[46]	117	[100]	525	[100]
TOTAL [% of all cases]	8469	[93]	35350	[93]	670	[7]	2810	[7]	9139	[100]	38160	[100]

B. TRANSMISSION CATEGORIES BY RACIAL/ETHNIC GROUP

	WHITE, NOT HISPANIC		BLACK, NOT HISPANIC		HISPANIC		OTHER[7]/ UNKNOWN		TOTAL	
	Cumulative		Cumulative		Cumulative		Cumulative		Cumulative	
ADULTS/ADOLESCENTS	Number	(%)	Number	(%)	Number	(%)	Number	(%)	Number	(%)
Homosexual/Bisexual Male	18464	(80)	3671	(41)	2516	(49)	261	(71)	24912	(66)
Intravenous (IV) Drug Abuser	1174	(5)	3126	(35)	1827	(35)	37	(10)	6164	(16)
Homosexual Male and IV Drug Abuser	1858	(8)	636	(7)	352	(7)	18	(5)	2864	(8)
Hemophilia/Coagulation Disorder	296	(1)	18	(0)	22	(0)	6	(2)	342	(1)
Heterosexual Cases[3]	221	(1)	1033	(11)	188	(4)	6	(2)	1448	(4)
Transfusion, Blood/Components	607	(3)	112	(1)	56	(1)	18	(5)	793	(2)
Undetermined[4]	439	(2)	452	(5)	201	(4)	20	(5)	1112	(3)
SUBTOTAL [% of all cases]	23059	[61]	9048	[24]	5162	[14]	366	[1]	37635	[100]
CHILDREN[5]										
Hemophilia/Coagulation Disorder	18	(16)	5	(2)	5	(4)	1	(25)	29	(6)
Parent with/at risk of AIDS[6]	51	(46)	249	(89)	107	(82)	3	(75)	410	(78)
Transfusion, Blood/Components	34	(31)	16	(6)	12	(9)			62	(12)
Undetermined[4]	8	(7)	10	(4)	6	(5)			24	(5)
SUBTOTAL [% of all cases]	111	[21]	280	[53]	130	[25]	4	[1]	525	[100]
TOTAL [% of all cases]	23170	[61]	9328	[24]	5292	[14]	370	[1]	38160	[100]

[1] These data are provisional.
[2] Cases with more than one risk factor other than the combinations listed in the tables or footnotes are tabulated only in the category listed first.
[3] Includes 769 persons (161 men, 608 women) who have had heterosexual contact with a person with AIDS or at risk for AIDS and 679 persons (540 men, 139 women) without other identified risks who were born in countries in which heterosexual transmission is believed to play a major role although precise means of transmission have not yet been fully defined.
[4] Includes patients on whom risk information is incomplete (due to death, refusal to be interviewed or loss to follow-up), patients still under investigation, men reported only to have had heterosexual contact with a prostitute, and interviewed patients for whom no specific risk was identified.
[5] Includes all patients under 13 years of age at time of diagnosis.
[6] Epidemiologic data suggest transmission from an infected mother to her fetus or infant during the perinatal period.
[7] Includes patients whose race/ethnicity is Asian/Pacific Islander (231 persons) and American Indian/Alaskan Native (38 persons).

D. AIDS CASES BY TRANSMISSION CATEGORIES AND DATE OF REPORT TO CDC, TWELVE-MONTH TOTALS

TRANSMISSION CATEGORIES[1]	Year Ending JUL 6, 1986		Year Ending JUL 6, 1987		CUMULATIVE CASES AND DEATHS SINCE JUNE 1981			
ADULTS/ADOLESCENTS	Number	(%)	Number	(%)	Number	(%)	Deaths	(% Cases)
Homosexual/Bisexual Male	7066	(66.5)	10493	(66.9)	24912	(66.2)	13888	(64.4)
Intravenous (IV) Drug Abuser	1861	(17.5)	2355	(15.0)	6164	(16.4)	3728	(17.3)
Homosexual Male and IV Drug Abuser	730	(6.9)	1118	(7.1)	2864	(7.6)	1717	(8.0)
Hemophilia/Coagulation Disorder	105	(1.0)	163	(1.0)	342	(0.9)	202	(0.9)
Heterosexual Cases[2]	373	(3.5)	597	(3.8)	1448	(3.8)	829	(3.8)
Transfusion, Blood/Components	221	(2.1)	414	(2.6)	793	(2.1)	534	(2.5)
Undetermined[3]	275	(2.6)	550	(3.5)	1112	(3.0)	681	(3.2)
SUBTOTAL	10631	(100.0)	15690	(100.0)	37635	(100.0)	21579	(100.0)
CHILDREN[4]								
Hemophilia/Coagulation Disorder	6	(3.5)	16	(7.3)	29	(5.5)	16	(4.8)
Parent with/at risk of AIDS[5]	136	(79.5)	170	(78.0)	410	(78.1)	259	(77.1)
Transfusion, Blood/Components	26	(15.2)	18	(8.3)	62	(11.8)	46	(13.7)
Undetermined[3]	3	(1.8)	14	(6.4)	24	(4.6)	15	(4.5)
SUBTOTAL	171	(100.0)	218	(100.0)	525	(100.0)	336	(100.0)
TOTAL	10802		15908		38160		21915	

E. AIDS CASES BY DATE OF DIAGNOSIS AND STANDARD METROPOLITAN STATISTICAL AREA (SMSA) OF RESIDENCE[6]

SMSA OF RESIDENCE	POPULATION[7]	BEFORE 1984	1984	1985	1986	1987[8]	CUMULATIVE TOTAL
New York, NY	9.12	1571	1695	2557	3256	794	9873
San Francisco, CA	3.25	461	606	930	1295	514	3806
Los Angeles, CA	7.48	353	444	837	1206	470	3310
Houston, TX	2.91	104	175	327	491	157	1254
Washington, DC	3.06	79	138	323	383	206	1129
Miami, FL	1.63	177	191	280	344	90	1082
Chicago, IL	7.10	68	123	223	343	165	922
Newark, NJ	1.97	125	137	228	286	135	911
Philadelphia, PA	4.72	56	110	194	271	99	730
Dallas, TX	2.97	33	84	165	284	150	716
Atlanta, GA	2.03	41	70	161	239	103	614
Boston, MA	2.76	59	76	144	207	106	592
San Diego, CA	1.86	31	44	114	195	81	465
Nassau-Suffolk, NY	2.61	56	66	115	175	52	464
Ft Lauderdale, FL	1.02	36	58	124	179	66	463
Jersey City, NJ	0.56	53	57	120	136	65	431
Seattle, WA	1.61	11	52	96	138	76	373
New Orleans, LA	1.19	19	50	85	124	53	331
Denver, CO	1.62	25	37	81	123	62	328
Anaheim, CA	1.93	34	41	73	102	61	311
Baltimore, MD	2.17	28	30	81	113	58	310
REST OF U.S.	166.55	740	1335	2498	3693	1479	9745
TOTAL	230.11	4160	5619	9756	13583	5042	38160

[1] Cases with more than one risk factor other than the combinations listed in the tables or footnotes are tabulated only in the category listed first.

[2] Includes 769 persons (161 men, 608 women) who have had heterosexual contact with a person with AIDS or at risk for AIDS and 679 persons (540 men, 139 women) without other identified risks who were born in countries in which heterosexual transmission is believed to play a major role although precise means of transmission have not yet been fully defined.

[3] Includes patients on whom risk information is incomplete (due to death, refusal to be interviewed or loss to follow-up), patients still under investigation, men reported only to have had heterosexual contact with a prostitute, and interviewed patients for whom no specific risk was identified.

[4] Includes all patients under 13 years of age at time of diagnosis.

[5] Epidemiologic data suggest transmission from an infected mother to her fetus or infant during the perinatal period.

[6] This table cumulates cases by DATE OF DIAGNOSIS rather than DATE OF REPORT. Because of this difference, totals may differ from those in other tables and will change with late reports and new data or information. These data are provisional. Data are reported only for SMSA's with greater than 300 reported cases of AIDS.

[7] Population of SMSA's in millions as reported in the 1980 CENSUS.

[8] Cases diagnosed in this calendar year and reported to CDC as of date of this summary.

G. CASES OF AIDS AND CASE-FATALITY RATES BY HALF-YEAR OF DIAGNOSIS, UNITED STATES

	NUMBER OF CASES	NUMBER OF KNOWN DEATHS[1]	CASE-FATALITY RATE
1981 Jan-June	86	78	91%
July-Dec	180	161	89%
1982 Jan-June	365	317	87%
July-Dec	647	559	86%
1983 Jan-June	1220	1060	87%
July-Dec	1587	1340	84%
1984 Jan-June	2436	1950	80%
July-Dec	3183	2516	79%
1985 Jan-June	4350	3223	74%
July-Dec	5406	3610	67%
1986 Jan-June	6461	3424	53%
July-Dec	7122	2508	35%
1987 Jan-June	5042	1106	22%
July-July 06	0	0	0%
TOTAL[2]	38160	21915	57%

H. REPORTED CASES AND DEATHS BY OPPORTUNISTIC DISEASE CATEGORY

	CASES REPORTED SINCE JANUARY 1/DEATHS				CUMULATIVE CASES/DEATHS			
	Reported Cases		Known Deaths[4]		Reported Cases		Known Deaths	
DISEASE CATEGORY REPORTED[3]	Number	(% Total)	Number	(% Cases)	Number	(% Total)	Number	(% Cases)
Pneumocystis carinii Pneumonia	6008	(66)	1700	(28)	24750	(65)	14282	(58)
Other Opportunistic Diseases	2225	(24)	910	(41)	8635	(23)	5442	(63)
Kaposi's Sarcoma	906	(10)	156	(17)	4775	(13)	2191	(46)
TOTAL	9139	(100)	2766	(30)	38160	(100)	21915	(57)

I. AGE AT DIAGNOSIS BY RACIAL/ETHNIC GROUP

	WHITE, NOT HISPANIC		BLACK, NOT HISPANIC		HISPANIC		OTHER[5]/ UNKNOWN		TOTAL	
AGE GROUP	Cumulative Number	(%)	Cumulative Number	(%)	Cumulative Number	(%)	Cumulative Number	(%)	Cumulative Number	(%)
Under 5	83	(0)	257	(3)	116	(2)	3	(1)	459	(1)
5 - 12	28	(0)	23	(0)	14	(0)	1	(0)	66	(0)
13 - 19	64	(0)	56	(1)	29	(1)	3	(1)	152	(0)
20 - 29	4394	(19)	2339	(25)	1195	(23)	65	(18)	7993	(21)
30 - 39	10675	(46)	4431	(48)	2507	(47)	174	(47)	17787	(47)
40 - 49	5255	(23)	1561	(17)	1014	(19)	92	(25)	7922	(21)
Over 49	2671	(12)	661	(7)	417	(8)	32	(9)	3781	(10)
TOTAL [% OF ALL CASES]	23170	[61]	9328	[24]	5292	[14]	370	[1]	38160	[100]

[1] Reporting of deaths is incomplete.
[2] Table totals include 75 cases diagnosed prior to 1981. Of these 75 cases, 63 are known to have died.
[3] Disease categories are ordered hierarchically. Cases with more than one disease are tabulated only in the disease category listed first. Kaposi's sarcoma has been reported in 1418 cases since January 1 and in 7730 cases cumulatively.
[4] Deaths are only in cases reported to CDC since January 1 of current year.
[5] Includes patients whose race/ethnicity is Asian/Pacific Islander (231 persons) and American Indian/Alaskan Native (38 persons).

Available monthly from the San Mateo County AIDS Project (415) 573-2588

SAN MATEO COUNTY
PUBLIC HEALTH DIVISION

CUMULATIVE SUMMARY OF ALL AIDS CASES
REPORTED TO DATE WITH SAN MATEO COUNTY RESIDENCY AT DIAGNOSIS

JULY 1 1987

TOTAL CASES DIAGNOSED TO DATE: 141

DATE OF DIAGNOSIS

1982	1	0.7%	
1983	10	7.1%	
1984	11	7.8%	
1985	36	25.5%	
1986	58	41.1%	
1987	24	17.0%	TOTAL
UNK	1	0.7%	141

AGE AT DIAGNOSIS

UNDER 20	0	0.0%	
20 - 29	24	17.0%	
30 - 39	45	31.9%	
40 - 49	33	23.4%	
50 - 59	26	18.4%	
60 - 69	10	7.1%	
70 - 79	3	2.1%	TOTAL
80 & ABOVE	0	0.0%	141

HOSPITAL AT DIAGNOSIS

CHOPE	24	17.0%
CORONER'S	3	2.1%
KAISER RWC	18	12.8%
KAISER SSF	11	7.8%
MILLS	15	10.6%
MT. ZION	2	1.4%
PENINSULA	11	7.8%
PMC	5	3.5%
PROVIDENCE	1	0.7%
RK DAVIES	6	4.3%
SEQUOIA	14	9.9%
SETON	10	7.1%
SF GENERAL	1	0.7%
SFVAMC	2	1.4%
ST.FRANCIS	5	3.5%
ST. LUKE'S	4	2.8%
STANFORD	3	2.1%
UCSF	5	3.5%
OUTPATIENT	1	0.7%
TOTAL	141	

ETHNICITY

WHITE	119	84.4%	
HISPANIC	10	7.1%	
BLACK	7	5.0%	
AS/PAC IS	3	2.1%	TOTAL
UNKNOWN	2	1.4%	141

SEX

MALE	135	95.7%	TOTAL
FEMALE	6	4.3%	141

RESIDENCE AT DIAGNOSIS

ATHERTON	5	3.5%
BELMONT	6	4.3%
BRISBANE	6	4.3%
BURLINGAME	4	2.8%
DALY CITY	14	9.9%
EL GRANADA	2	1.4%
FOSTER CITY	9	6.4%
HALF MOON BAY	4	2.8%
HILLSBOROUGH	5	3.5%
MENLO PARK	5	3.5%
MILLBRAE	2	1.4%
PACIFICA	3	2.1%
PORTOLA VALLEY	2	1.4%
REDWOOD CITY	18	12.8%
SAN BRUNO	12	8.5%
SAN CARLOS	4	2.8%
SAN MATEO	23	16.3%
SO. S.F.	14	9.9%
WOODSIDE	1	0.7%
UNKNOWN	2	1.4%
TOTAL	141	

MORTALITY BY YEAR OF DIAGNOSIS

	ALIVE/UNKNOWN		DEAD		TOTAL	
1982	0	0.0%	1	100.0%	1	
1983	2	20.0%	8	80.0%	10	
1984	2	18.2%	9	81.8%	11	
1985	7	19.4%	29	80.6%	36	
1986	32	56.1%	25	43.9%	57	
1987	18	72.0%	7	28.0%	25	TOTAL
UNKNOWN	0	0.0%	1	100.0%	1	141

DISEASE SPECIFIC MORTALITY

	TOTAL		ALIVE/UNKNOWN		DEAD	
KS	17	12.1%	9	14.8%	8	10.0%
PCP	75	53.2%	39	63.9%	36	45.0%
OI	34	24.1%	7	11.5%	27	33.8%
KS & OI	3	2.1%	1	1.6%	2	2.5%
KS & PCP	2	1.4%	1	1.6%	1	1.3%
PCP & OI	9	6.4%	3	4.9%	6	7.5%
KS, PCP & OI	0	0.0%	0	0.0%	0	0.0%
LYMPHOMA	1	0.7%	1	1.6%	0	0.0%
TOTAL	141	100%	61	100%	80	100%

DISTRIBUTION BY DISEASE AND DATE OF DIAGNOSIS

	UNK	82	83	84	85	86	87	TOTAL	
KS	0	0	2	2	5	6	2	17	12.1%
PCP	3	1	3	5	15	33	15	75	53.2%
OI	0	0	4	4	10	13	3	34	24.1%
KS & OI	0	0	0	0	2	0	1	3	2.1%
KS & PCP	0	0	0	0	0	2	0	2	1.4%
PCP & OI	0	0	1	0	3	5	0	9	6.4%
KS, PCP & OI	0	0	0	0	0	0	0	0	0.0%
LYMPHOMA	0	0	0	0	0	1	0	1	0.7%
TOTAL	3	1	10	11	35	60	21	141	100

KS = KAPOSIS'S SARCOMA
PCP = PNEUMOCYSTIS CARINII PNEUMONIA
OI = OTHER OPPORTUNISTIC INFECTIONS
LYMPHOMA = PRIMARY LYMPHOMA OF BRAIN

RISK FACTORS

IVD ONLY	3	2.1%
TRANSFUSION	8	5.7%
HEMOPHILIAC	1	0.7%
[illegible]BISEXUAL MEN	122	86.5%
HETERO HIGH RISK PARTNER as only risk factor	1	0.7%
NO IDENT. RISK FACTOR	1	0.7%
UNKNOWN	5	3.5%
TOTAL	141	100%

BREAKDOWN OF RISK GROUPS

GAY & BISEXUAL MEN (TOTAL)	121	
& IVD	3	
& HETERO PARTNER WITH AIDS	1	
& TRANSFUSION RECIP.	1	
WOMEN		
IVD	1	16.7%
IVD USING EX-SPOUSE	1	16.7%
TRANSFUSION RECIP	3	50.0%
SPOUSE WITH ARC	1	16.7%
TOTAL	6	100%

HETEROSEXUAL MEN		
TRANSFUSION RECIP	5	55.6%
IVD	2	22.2%
NIR	1	11.1%
UNK	1	11.1%
TOTAL	9	100%

TOTAL 141

AIDS REFERRALS AND RESOURCES

AIDS Antibody Testing/Sexually Transmitted Diseases Testing and Treatment:

AIDS Hotline - Bay Area - 863-AIDS; Northern California - *800-FOR AIDS
Our Health Center - Palo Alto - (415) 327-8717
Planned Parenthood -(415) 574-5823
San Mateo County Public Health Clinic -(415) 573-2516

Care For People With AIDS:

Ellipse -(415) 366-AIDS

Counseling and Services Referrals:

San Mateo County AIDS Project, Ed Hilton -(415) 573-2588

Curriculum Resources and Development for classroom use:

San Mateo County Office of Education, Barbara K. Bissell -(415) 363-5457
San Mateo County Health Department Jim Perkins -(415) 573-2398

Information and Referral:

Local:
San Mateo County AIDS Project -(415) 573-2588
Bay Area Physicians for Human Rights (Gay-Lesbian Referrals) -(415) 673-3189
Ellipse -(415) 366-AIDS

National:
AZT (Drug; Research Data) - *800-843-9388
National AIDS Hotline - *800-342-AIDS

Materials:

San Mateo County Office of Education, Barbara K. Bissell -(415) 363-5457
San Mateo County AIDS Project -(415) 573-2588
Peer Resource Project, Tracey Packer -(415) 573-3417
Planned Parenthood, Jennifer Krumm -(415) 574-5823
Red Cross -(415) 692-7214
San Mateo County Health Department Jim Perkins -(415) 573-2398

School Policy Consultation:

San Mateo County Office of Education, Barbara K. Bissell -(415) 363-5457
San Mateo County Health Department Jim Perkins -(415) 573-2398

Presentations--School/Youth/Community:

Adult Speakers - San Mateo County Health Department Jim Perkins -(415) 573-2398
Teen Peer Educators - Peer Resource Project, Tracey Packer -(415) 573-3417

* Toll free number

Support Groups:

Beacon of Hope -(415) 366-1088

Training for School Staff:

San Mateo County Office of Education, Barbara K. Bissell -(415) 363-5457
San Mateo County Health Department Jim Perkins -(415) 573-2398

RELATED RESOURCES

Children's Protective, San Mateo County -(415) 573-2866

Drew Teen Pregnancy Program -(415) 328-5060

Drug Abuse Education and Counseling
Project Pegasus -(415) 321-3727
Pros for Kids -(415) 571-6726
Pyramid Alternatives -(415) 355-8787
Safe Rides -(415) 341-5633; *800-862-7233
Serenity-(415) 368-1437
Tri Cities Drug Program -(415) 858-3302

Family Stress Service, San Mateo County -(415) 877-8585

Health Line (La Linia Bilingue) -(415) 368-7777

National Runaway Switchboard - *800-621-4000

Parental Stress Hotline, San Mateo County -(415) 327-0223

Psychiatric Emergency Crisis Teams -(415) 573-3535

Rape Crisis Line -(415) 877-8787

Teen Line, San Mateo County -(415) 327-TEEN

San Francisco Sex Information -(415) 621-7300

San Mateo Natural Family Planning -(415) 345-9076

Suicide Prevention, San Mateo County -(415) 877-5604

Your House North -(415) 877-5417

Your House South -(415) 367-9687

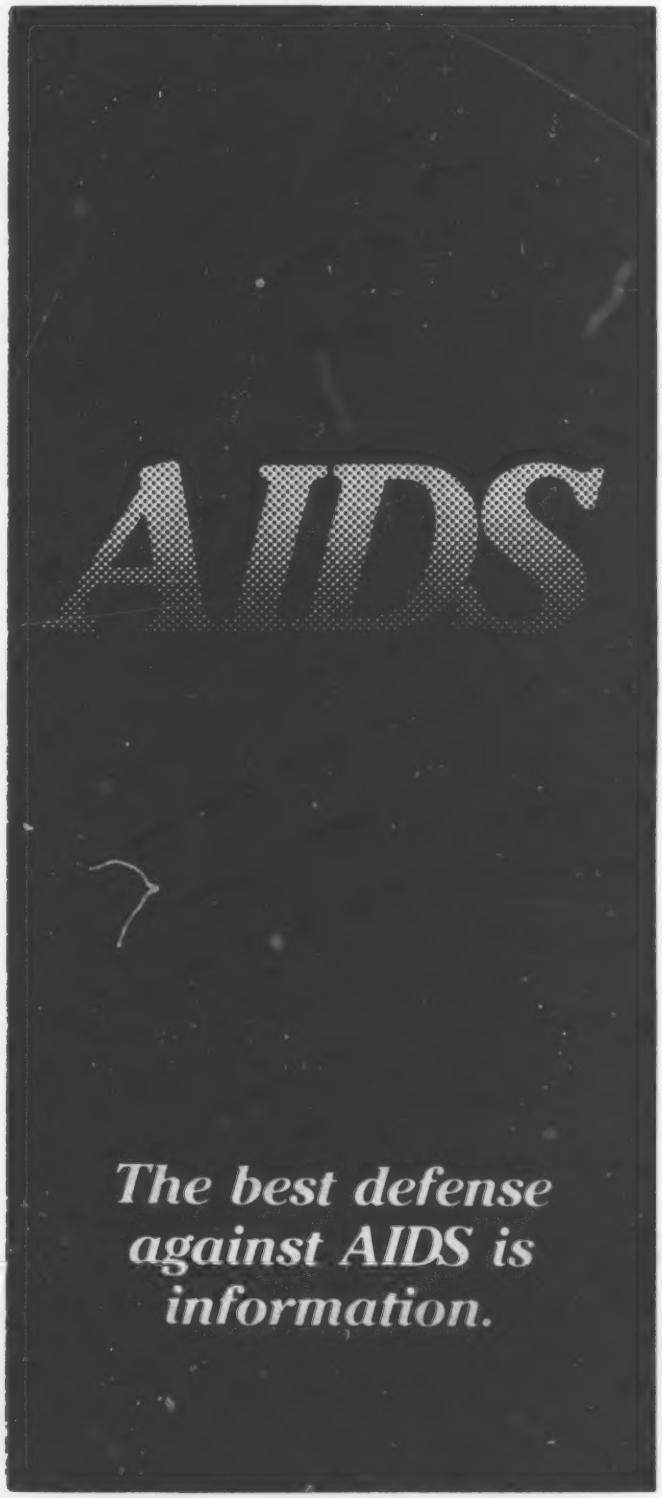
* Toll free number

AUDIO-VISUAL MATERIALS: Available from San Mateo County Offie of Education Media Services

CATALOG NUMBER	TITLE	GRADES
V4142	AIDS THE DISEASE AND WHAT WE KNOW (also titled "AIDS ALERT")	4-6
V4078	AIDS IN YOUR SCHOOL	7-Adult
V4097	AIDS: BEYOND FEAR	7-Adult
V9078	AIDS: FACTS AND FEARS, CRISIS AND CONTROL	8-Adult
5368	AIDS: WHAT EVERYONE NEEDS TO KNOW	8-Adult
V9077	EPIDEMIC OF FEAR, AN: AIDS IN THE WORKPLACE	10-Adult
3578	MILLION TEENAGERS, A (4TH REV.)	7-12
V9061	SEX, DRUGS, AND AIDS (CONTROVERSIAL MATERIAL)	9-14

All of the above audio-visual materials deal with sensitive issues. It is recommended that you have District approval for classroom use.

SAN MATEO DEPT. OF PUBLIC HEALTH
225 W. 37TH AVENUE
SAN MATEO, CA 94403



For confidential AIDS information and referrals call the —

AIDS Coordination Office
573-2588
from 9 a.m. to 9 p.m.

Bay Area Physicians for Human Rights
. . .(415) 673-3189

San Francisco AIDS Foundation Hotline
. . .(415) 863-AIDS

Toll Free in Northern California
. . .(800) FOR-AIDS

TDD. . .(415) 864-6606

People with AIDS Switchboard 864-4376:
emotional support, referrals

Free copies available from: San Mateo County Health Department
AIDS Project
(415) 573-2588

Pamphlet

Teacher Resources

Wallet Folder

AIDS and Children

Information for Parents of School-age Children

American Red Cross

U.S. Public Health Service

Free copies available through American Red Cross

PEER RESOURCE PROJECT
"TEENS REACHING OUT TO TEENS"

HELP LINES

"REACHING OUT TO HELP TEENS"

HELP LINES...

Catholic Worker House	364-5374
Children's Protective Services	573-2866
Parental Stress Hotline (also services teens)	327-3333
Your House North	877-5417
Your House South	367-9687
Youth Service Bureau	_____

Look number up in your local directory

DRUGS & ALCOHOL...

Cocaine Hotline (toll free)	(800) 262-2463
Project Pegasus	321-3727
Pyramid Alternatives	355-8787
Safe Rides (toll free)	(800) 862-7233
Serenity Inc.	368-1437

additional info on back...

MORE HELP LINES...

Poison Control Center	666-2845
Suicide Prevention Crisis Center	877-5600
Planned Parenthood	368-7777
V.D. Clinic	573-2516
Rape Crisis Line	877-8787
Teen Line	327-TEEN
Family Stress Service North	877-8585
Family Stress Service South	363-2111

Free copies available from:
Peer Resource Project
San Mateo County Health Department
(415) 573-3417

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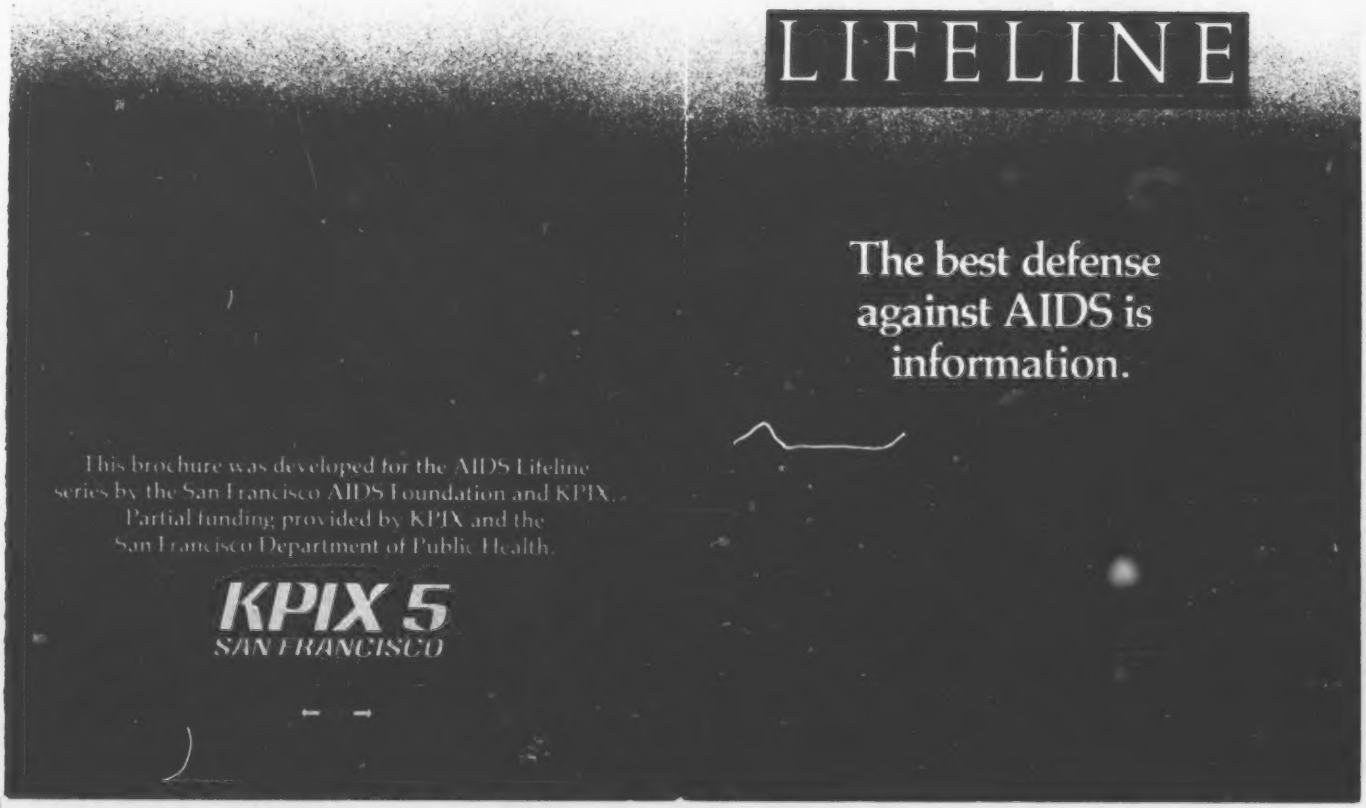
SJSU SAN JOSE STATE UNIVERSITY
AIDS EDUCATION COMMITTEE


LIFELINE
The best defense against AIDS is information.
This brochure was developed for the AIDS Lifeline series by the San Francisco AIDS Foundation and KPIX. Partial funding provided by KPIX and the San Francisco Department of Public Health.
KPIX 5
SAN FRANCISCO

Free copies available from: San Francisco AIDS Foundation
(415) 864-4376